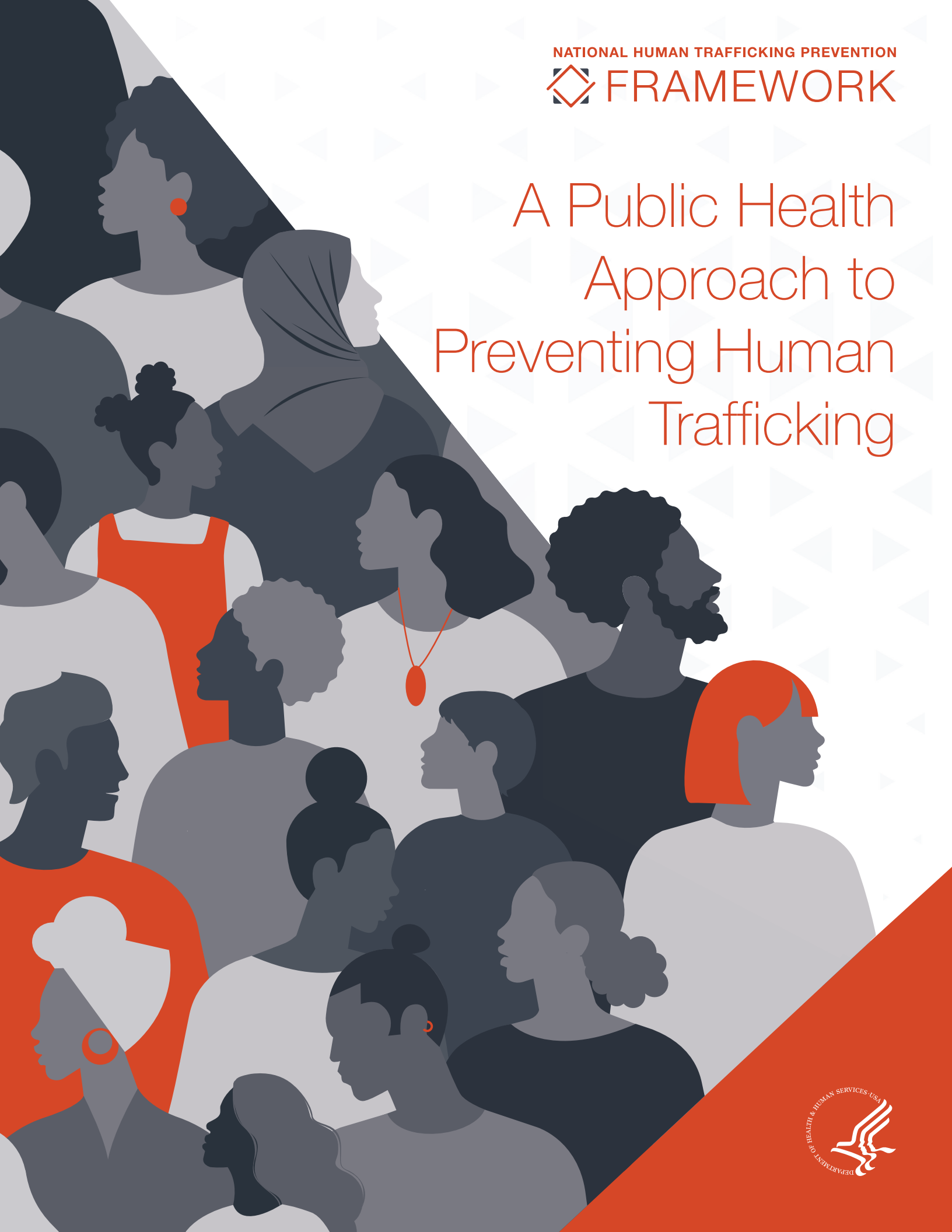


# A Public Health Approach to Preventing Human Trafficking







# Contents

Acknowledgements .....	1
About the U.S. Department of Health and Human Services Task Force to Prevent Human Trafficking.....	2
Executive Summary .....	4
Prioritizing Human Trafficking Prevention .....	5
The Public Health Approach to Human Trafficking .....	7
Socio-Ecological Model.....	10
Social Determinants of Health .....	16
Partners in Prevention.....	17
Collective Impact .....	20
Guiding Principles.....	22
Equity and Inclusivity .....	22
Evidence-Based Approaches.....	25
Multidisciplinary Collaboration .....	26
Person-Centered Approaches.....	27
Two-Generation/Whole Family Approaches .....	29
Strategies and Approaches .....	31
Strategy 1: Strengthen Skills to Promote Self-Efficacy and Prevent Human Trafficking (Individual Level).....	34
Strategy 2: Identify and Support People at Risk for or Who Have Experienced Human Trafficking to Increase Safety and Reduce Harm (Individual Level).....	35
Strategy 3: Strengthen Economic Supports (Individual Level) .....	43
Strategy 4: Promote Family Environments That Support Healthy Development (Relationship Level) ...	47
Strategy 5: Promote Social Connectedness (Relationship Level) .....	49
Strategy 6: Create Protective Environments (Community Level).....	51
Strategy 7: Foster Multidisciplinary Networks and Coalitions .....	53
Strategy 8: Promote Social Norms That Protect Against Violence (Societal Level) .....	56



Appendix A: Potential Activities and Outcomes for Framework Strategies.....	59
Strategy 1: Strengthen Skills to Promote Self-Efficacy and Prevent Human Trafficking .....	59
Strategy 2: Identify and Support People Who Have Experienced or are At-Risk of Experiencing Human Trafficking to Increase Safety and Reduce Harm .....	60
Strategy 3: Strengthen Economic Supports .....	62
Strategy 4: Promote Family Environments That Support Healthy Development .....	63
Strategy 5: Promote Social Connectedness .....	64
Strategy 6: Create Protective Environments .....	64
Strategy 7: Foster Multidisciplinary Networks and Coalitions .....	65
Strategy 8: Promote Social Norms That Protect Against Violence .....	66
Appendix B: How This Framework Was Created .....	67
Appendix C: Endnotes.....	70



# Acknowledgements

This National Human Trafficking Prevention Framework (Prevention Framework) builds upon the successes and strengths of decades of violence prevention efforts implemented and assessed across all levels of society. The U.S. Department of Health and Human Services (HHS) would like to thank the individuals and organizations that provided their time and expertise to ensure this framework reflects a diversity of perspectives and experiences—including individuals who have experienced human trafficking, advocates, and local, state, tribal, national, and international agencies and organizations. Specifically, HHS would like to thank the [U.S. Advisory Council on Human Trafficking](#) and the following consultants who provided critical insights to the Prevention Framework:

- Wade Arvizu, Senior Program Specialist, Global Fund to End Modern Slavery
- Nathan Earl, Principal, giantslayer
- Ingrid D. Guerrero Rodriguez, Human Trafficking Subject Matter Expert
- Lenny Hayes, Executive Director, Tate Topa Consulting
- Jesus “Jesse” Leon, President, Alliance Way
- Susana Lewandowski, Licensed Marriage and Family Therapist
- Bandak “Dak” Lul, Human Trafficking Subject Matter Expert

For more information on how the Prevention Framework was created, see [Appendix B](#).



# About the U.S. Department of Health and Human Services Task Force to Prevent Human Trafficking

The U.S. Department of Health and Human Services (HHS) plays a critical role in the U.S. Government's efforts to prevent and respond to human trafficking. The [HHS Task Force to Prevent Human Trafficking](#) helps implement [HHS's priority actions](#) in the [National Action Plan to Combat Human Trafficking](#) and related national strategies. The National Human Trafficking Prevention Framework contributes to the implementation of National Action Plan Priority Action 1.1.2 to increase the scale and quality of human trafficking prevention efforts utilizing a collective impact strategy.

Through the Task Force, HHS collaborates with federal, state, tribal, territorial, local, and non-governmental partners, including people with lived experience, to develop and deliver services to protect those individuals at risk for, currently experiencing, or who have experienced human trafficking. Much of the Task Force's work integrates into the [Senior Policy Operating Group](#) and its respective committees and working groups, comprised of government officials representing agencies in the [President's Interagency Task Force to Monitor and Combat Trafficking in Persons \(PITF\)](#). HHS also develops public-private partnerships to spur innovative solutions to prevent human trafficking and generate novel ideas for addressing human trafficking across diverse sectors.

The Task Force is co-chaired by the Assistant Secretary for Children and Families and the Assistant Secretary for Health and includes representation from the following 21 divisions and offices across HHS:

- [Administration for Children and Families](#)
- [Administration for Community Living](#)
- [Administration for Strategic Preparedness and Response](#)
- [Agency for Healthcare Research and Quality](#)
- [Assistant Secretary for Financial Resources](#)
- [Assistant Secretary for Health](#)
- [Assistant Secretary for Planning and Evaluation](#)
- [Center for Faith-Based and Neighborhood Partnerships](#)
- [Centers for Disease Control and Prevention](#)
- [Centers for Medicare and Medicaid Services](#)
- [Departmental Appeals Board](#)
- [Health Resources and Services Administration](#)
- [Immediate Office of the Secretary](#)
- [Indian Health Service](#)
- [National Institutes of Health](#)
- [Office for Civil Rights](#)



- [Office of Global Affairs](#)
- [Office of Inspector General](#)
- [Office of Medicare Hearings and Appeals](#)
- [Office of the National Coordinator for Health Information Technology](#)
- [Substance Abuse and Mental Health Services Administration](#)

The Task Force has three overarching goals:

- Build the capacity of HHS divisions and programs to prevent and respond to human trafficking through coordination and information sharing.
- Initiate strategic opportunities to integrate human trafficking prevention and intervention through cross-division collaboration.
- Leverage strengths, reach, and resources of health and human service divisions to directly benefit individuals, families, and communities affected by human trafficking, and inform anti-trafficking policies and practices.

The Task Force has established three working committees:

- The **Public Engagement Committee** coordinates efforts to build the capacity of HHS divisions, programs, and regions to prevent human trafficking, and initiates strategic opportunities to integrate human trafficking prevention through cross-division collaboration and jointly funded projects.
- The **Services Committee** supports HHS efforts that promote a strategic, coordinated approach to the provision of services for individuals who have experienced human trafficking; advances evidence-based practices in services; develops and promotes outreach, training, and technical assistance to increase identification and expand the availability of services for survivors of human trafficking; promotes effective, culturally responsive, person-centered, trauma-informed services that improve the short- and long-term health, safety, and well-being of those who have experienced trafficking.
- The **Data and Policy Committee** facilitates forums and discussions on human trafficking data, policy, and prevalence among agencies; invites external researchers and experts to share their latest findings with the Committee; and ensures agencies' research and policy efforts are complementary.





# Executive Summary

Human trafficking, defined as the use of force, fraud, or coercion to compel someone to perform labor or a commercial sex act, impacts millions of people in the United States and throughout the world.<sup>1</sup> As a form of violence, human trafficking has adverse short- and long-term physical and behavioral health, developmental, and financial consequences, which can extend beyond the person directly impacted to affect families, communities, industries, and society.

Since Congress passed the Trafficking Victims Protection Act of 2000 (TVPA), the United States has expanded protections for people who have experienced human trafficking and strengthened efforts to hold traffickers accountable through prosecution. While the TVPA identifies prevention as a third, albeit equal, component, a focused array of prevention strategies addressing human trafficking remains underdeveloped.

The National Human Trafficking Prevention Framework (Prevention Framework) adopts established concepts of violence prevention to outline strategies and approaches that can help develop and enhance human trafficking prevention efforts. Grounded in a public health approach, the Prevention Framework recognizes how a complex interplay of individual, relational, communal, and societal contexts contribute to the underlying factors that increase risks for violence, including human trafficking. To effectively address this widespread public health issue that impacts individuals, families, and communities across generations, the Prevention Framework encourages cooperation among diverse sectors and collaborators to provide holistic services for those affected by human trafficking.

The Prevention Framework includes eight mutually reinforcing strategies and 32 approaches that build protective factors against human trafficking across contexts to achieve maximum impact. Collectively, the Prevention Framework provides methods to bolster prevention efforts at primary, secondary, and tertiary levels to stop human trafficking before it occurs, reduce its impact, mitigate lasting effects, and prevent it from recurring. Guiding principles drive each strategy and approach to help facilitate the development of equitable, person-centered, evidence-based, multidisciplinary human trafficking prevention activities that support children and adults simultaneously.

Strategies and approaches included in the Prevention Framework can be developed and integrated into existing violence prevention strategies, and subsequently tested, evaluated, and scaled within different contexts and settings to expand the evidence base and stimulate widespread change. When utilized together, the Prevention Framework's strategies and approaches will systematize and operationalize human trafficking prevention activities, yielding multi-level, multi-sector solutions to prevent human trafficking and improve the lives of people at risk for, currently experiencing, or who have experienced human trafficking across the United States.





# Prioritizing Human Trafficking Prevention

The International Labor Organization estimates on any given day in 2021, 27.6 million people were experiencing forced labor and/or commercial sexual exploitation globally.<sup>2</sup> The estimated global prevalence of human trafficking increased from 3.4 to 3.5 per 1,000 people between 2016 and 2021 driven entirely by the private economy.<sup>3</sup> Although there is still no rigorous prevalence estimate of human trafficking within the United States, cases of human trafficking have been reported in all 50 states and the District of Columbia, on tribal land, and within U.S. territories.<sup>4</sup>

Human trafficking is a public health issue and crime with adverse physical and mental health, developmental, financial, and social effects, which often reach beyond the individual directly

impacted to affect families, communities, industries, and society. In response to the U.S. government's recognition that human trafficking is both a transnational and national issue of significant concern, the TVPA of 2000 and its subsequent reauthorizations created a three-pronged ("3P") federal framework to address human trafficking: prevention, protection, and prosecution. A fourth "P"—partnership—serves as a complementary means to achieve progress across the 3Ps and to engage multiple sectors of society in the work to address human trafficking.<sup>5</sup> Steady progress has been made since the TVPA was first authorized; however, efforts to assemble a focused array of prevention strategies addressing both victimization and perpetration, while essential, are lacking.<sup>6</sup>

## Human Trafficking Defined<sup>7</sup>

Within the United States, human trafficking is generally understood to mean:

**Labor Trafficking:** The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery. \*

**Sex Trafficking:** The recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purpose of a commercial sex act, in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age. \*\*

*\*For additional legal definitions, see 18 U.S.C. Chapter 77 (criminal definitions) and 19 U.S.C. § 1307 (includes customs definition of "forced labor"). Among other provisions, Chapter 77 includes the core forced labor and sex trafficking crimes; crimes related to peonage, slavery, and involuntary servitude; and a crime captioned "trafficking with respect to peonage, slavery, involuntary servitude, or forced labor," which prohibits recruiting, harboring, transporting, providing, or obtaining by any means a person for labor or services in violation of Chapter 77. 18 U.S.C. § 1590.*

*\*\*The term "commercial sex act" means any sex act on account of which anything of value is given to or received by any person. 22 U.S.C. § 7102(4). 18 U.S.C. § 1591 provides a criminal definition for sex trafficking that is similar to that contained within 22 U.S.C. § 7102(11); it prohibits the same acts in addition to enticing, advertising, or maintaining a person for the same purpose and through the same means.*

See also <https://www.state.gov/what-is-trafficking-in-persons>



The **National Human Trafficking Prevention Framework (Prevention Framework)** is a catalytic effort to harness established concepts of violence prevention to prevent human trafficking. It contains eight strategies and 32 approaches that can prevent human trafficking and its recurrence (primary and secondary prevention) while promptly identifying and reducing harm caused by human trafficking (secondary and tertiary prevention). The Prevention Framework recognizes some actions can directly prevent human trafficking while others can contribute to disrupting indirect pathways that lead to human trafficking.

With the release of the Prevention Framework, HHS invites partners from across federal, state, tribal, territorial, and local governments; business, industry, and other private sector entities; nonprofits and non-governmental organizations (NGOs); educational institutions; and philanthropic, faith-based, and research

organizations to join this collective effort. Some approaches will be best implemented by experts in the anti-trafficking field, while others require coordination and collaboration with other sectors.

The Prevention Framework provides examples to encourage collaboration, coordination, and integration to strengthen human trafficking prevention. It does not expect organizations with a specific anti-trafficking mission to significantly alter their objectives (i.e., become poverty reduction or youth education organizations); nor does it call on organizations addressing risk and protective factors to shift their focus on solely responding to human trafficking. Through collective action—bringing together sectors with diverse expertise, influence, and resources—HHS and its partners will be able to test and scale solutions that will prevent human trafficking and improve the lives of people affected by human trafficking across the United States.



# The Public Health Approach to Human Trafficking

The Prevention Framework is informed by a public health approach to violence prevention, recognizing human trafficking does not occur in isolation, but rather impacts the health and well-being of individuals, families, and communities across generations.<sup>8</sup> The violence of human trafficking is dynamic, shifting, and ever-changing, as traffickers adapt their recruitment schemes, methods of control, and modes of exploitation. As understanding and knowledge of human trafficking grow, strategies to address it must evolve as well. Treating human trafficking as a public health concern grants a renewed sense of urgency and fundamentally alters how collaborators prevent and respond to it.

The public health approach is a four-step, science-based process: (1) define and monitor the problem, (2) identify risk and protective factors, (3) develop and test prevention strategies, and (4) assure widespread adoption.<sup>9</sup> Efforts to develop, test, and scale prevention strategies within the field of human trafficking are relatively new, and rigorous evaluation of the effectiveness of human trafficking prevention programs is currently limited.<sup>10,11,12</sup> As the anti-trafficking field continues to build its evidence base, it can look to empirical literature from other more established sectors of violence prevention (e.g., intimate partner violence, sexual violence, workplace violence, and youth violence) to establish a starting point. The rationale for this approach is all forms of violence are

interconnected and often stem from similar causal factors, and cross-cutting intervention strategies should be tested and evaluated for effectiveness across the many forms of violence that comprise human trafficking.<sup>13,14</sup>

***“Public Health draws on a science base that is multi-disciplinary. It relies on knowledge from a broad range of disciplines including medicine, epidemiology, sociology, psychology, criminology, education, and economics.”***

***“The public health approach also emphasizes input from diverse sectors including health, education, social services, justice, policy, and the private sector. Collective action on the part of these stakeholders can help in addressing problems like violence.”***

– [Centers for Disease Control and Prevention](#)

A public health approach to human trafficking is proactive rather than reactionary, moving upstream to identify prevention measures that, combined with downstream interventions, can decrease the number of people who experience trafficking. Focusing on three levels of prevention—primary, secondary, and tertiary—a public health approach seeks to stop human trafficking before it occurs, reduce its impact or duration, mitigate lasting effects, and prevent it from recurring.



Levels of Prevention <sup>15</sup>		
Primary Prevention: Prevents violence BEFORE it occurs.	Secondary Prevention: Provides an immediate response to violence AFTER it occurs.	Tertiary Prevention: Provides long-term, ongoing support AFTER violence occurs.
Involves programs, strategies, and interventions designed to reduce factors that put people at risk for experiencing or perpetrating violence. Encourages protective factors that buffer people from violence, such as providing education on healthy relationships, building awareness of personal risk factors, providing peer support, promoting access to critical services, or addressing laws and policies that maintain economic and social inequities.	Addresses short-term consequences/effects and focuses on the immediate needs of people who have experienced human trafficking, such as connection to safe and responsive emergency services, health and mental healthcare, and housing. Strategies often include universal or selected screening for human trafficking or related forms of violence.	Establishes accessible, effective, long-term responses, including supportive services such as long-term housing, job training, legal advocacy, therapeutic counseling, and other services that seek to prevent revictimization and mitigate long-term psychosocial and emotional effects.
<i>All activities should be grounded in the guiding principles outlined later in this framework.</i>		

Prevention Approaches <sup>16</sup>	
Universal Approach	Prevention efforts focused on a population without knowing individual risk.
Selected Approach	Prevention efforts focused on those individuals or groups that show one or more risk factors for violence.
Indicated Approach	Prevention efforts for those who have demonstrated or experienced violent behavior.

Critically, a public health approach to human trafficking expands who is involved in anti-trafficking work, broadened from a traditional criminal justice response, and emphasizes how input from diverse sectors and collaborators is essential for preventing human trafficking and interrelated forms of violence and harm. This expansion diversifies the individuals and

organizations within the community equipped to provide education and services to people at risk for, currently experiencing, or who have experienced human trafficking, furthering opportunities to meet people where they are and provide options for when and how they will engage with services.



The Public Health System*	
<ul style="list-style-type: none"> <li>• Advocacy Groups</li> <li>• Businesses</li> <li>• Childcare Providers</li> <li>• Child Welfare Organizations</li> <li>• Civic Groups</li> <li>• Community Action Agencies</li> <li>• Community Centers</li> <li>• Community Health Centers</li> <li>• Disability Organizations</li> <li>• Emergency Medical Services</li> <li>• Faith-Based Organizations</li> <li>• Family Support and Resource Centers</li> <li>• Federal Government</li> <li>• Foreign Embassies and Consulates</li> <li>• Home Health Providers</li> <li>• Housing Providers</li> <li>• Hospitals</li> <li>• Human Service Agencies</li> <li>• Immigration Organizations</li> <li>• Individuals Impacted by Human Trafficking and Related Forms of Violence</li> <li>• Labor Organizing Groups</li> </ul>	<ul style="list-style-type: none"> <li>• Law Enforcement and Judiciary</li> <li>• Licensing and Inspection Agencies</li> <li>• Local Government</li> <li>• Mental Health Providers</li> <li>• Neighborhood Organizations</li> <li>• News and Communications Companies</li> <li>• Non-Profit and NGOs</li> <li>• Philanthropic Organizations</li> <li>• Primary Care/Health Delivery Organizations</li> <li>• Public Health Agencies</li> <li>• Research Organizations</li> <li>• Schools, Colleges, and Universities</li> <li>• Service Intake, Referral, and Navigation Hubs</li> <li>• Social Services Providers</li> <li>• State Government</li> <li>• Substance Use Treatment Centers</li> <li>• Technology Companies</li> <li>• Territorial Government</li> <li>• Transit Organizations</li> <li>• Tribal Government</li> <li>• Tribal Health</li> </ul>

*\*This is not an exhaustive list.*



## Socio-Ecological Model

As a key component of the public health approach, the socio-ecological model outlines the interrelated factors that can put people at risk for experiencing or perpetrating violence.<sup>17</sup>

The socio-ecological model encourages a holistic response by recognizing how a complex interplay of individual, relational, communal, and societal contexts can contribute to the underlying factors that increase risks for human trafficking. It is important to note that specific demographic identities do not make a person inherently vulnerable to human trafficking. Rather, certain demographics are disproportionately impacted by social, cultural, and political factors, such as discrimination, disconnection from services and support, stigma, etc., that increase their risk for human trafficking. Risk factors influenced by different contexts (i.e., substance misuse, familial poverty, harmful cultural norms, etc.) can often accumulate, thereby substantially

increasing a person's vulnerability for human trafficking.<sup>18</sup> Because these factors influence and contribute to one another, effective prevention strategies should work across multiple levels concurrently.

- **Individual:** Demographics, including age, race, ethnicity, sex, gender identity, sexual orientation, and disability status; attitudes and beliefs; socioeconomic status; immigration status; and personal history with trauma, including adverse childhood experiences.
- **Relationship:** Interpersonal relationships with peers, partners, and family (nuclear, extended, caregivers, chosen, etc.).
- **Community:** Communal settings, including schools, workplaces, houses of worship, neighborhoods, and online communities.
- **Societal:** Social and cultural norms, belief systems, and social and economic policies.





# Risk Factors and Determinants of Victimization and Perpetration of Human Trafficking and Related Violence<sup>1</sup>

## Individual

### Victimization

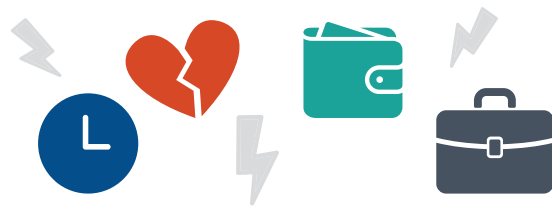
- Disability
- Economic stress (e.g., debt, ransom/extortion, unemployment, underemployment)
- Fear of authority and law enforcement
- Housing instability, including history of running away or experiencing homelessness as a youth
- Immigration status
- Lack of family, community, or social support for navigating identity including but not limited to 2SLGBTQIA+<sup>2</sup>
- Limited familiarity with opportunities and limitations within U.S. systems (e.g., legal, social service, etc.)
- Limited or inaccurate understanding of labor rights
- Recent migration or displacement

### Victimization/Perpetration

- Attitudes accepting or justifying violence, aggression, and/or exploitation
- Disconnection from culture, relocation, separation from community of origin
- Discrimination based on sex, gender identity, race, ethnicity, and/or sexual orientation
- Disruptions in educational achievement and/or lack of access to quality education
- Experiencing violence, abuse, or neglect (e.g., physical, sexual, emotional)
- Food insecurity
- Forced or coerced marriage
- Lack of employment opportunity with living wage
- Lack of work authorization
- Limited healthy and prosocial problem-solving skills
- Low self-esteem
- Mental health disorders
- Normalization of abuse and/or exploitation, including online harassment and abuse
- Substance use and misuse
- System involvement (child welfare, juvenile justice, criminal justice)
- Witnessing violence, aggression, or exploitation in the home or community (e.g., violence perpetrated by gang members, abuse of power by community leaders or law enforcement)

### Perpetration

- Aggressive behavior as a youth
- Anger and hostility
- Desire for power and control in relationships
- Economic stress (e.g., unemployment, underemployment)
- Poor behavior control and impulsiveness



**Continued on next page**

<sup>1</sup> Risk factors and determinants of victimization and perpetration have been informed by the resources on violence prevention developed by the Division of Violence Prevention within the Centers for Disease Control and Prevention's National Center for Injury Prevention and Control, empirical literature, and input from experts in human trafficking and violence prevention. This is not an exhaustive list.

<sup>2</sup> Two-Spirit, lesbian, gay, bisexual, transgender, queer, questioning, intersex, asexual individuals, and other gender and romantic minorities



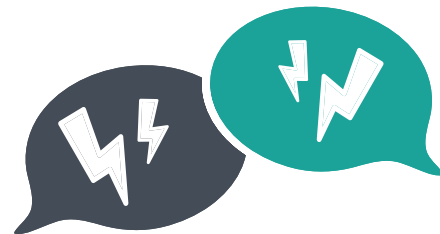


## Risk Factors and Determinants of Victimization and Perpetration of Human Trafficking and Related Violence *(Continued)*

### Relationship

#### Victimization/Perpetration

- Association with antisocial and aggressive peers
- Emotionally unsupportive family environment
- Family economic stress
- Family/friends involved in exploitative situations
- Families that are isolated from and not connected to other people (extended family, friends, neighbors)
- Families with high conflict and negative communication styles
- Gang involvement
- Loss of or disconnection from a caregiver/parent, intimate partner, or significant family member
- Mental illness in household
- Parents with less than a high-school education
- Social isolation/lack of social support
- Substance use/misuse within household
- Witnessing violence between parents as a child



### Community

#### Victimization/Perpetration

- Acceptance of violence
- Communities where families frequently experience food insecurity
- Community norms that discourage and/or retaliate in response to help seeking behavior
- Community norms that promote drug and alcohol use
- High rates of discrimination against specific groups
- High rates of poverty
- High rates of violence and crime
- Limited access to social, health, and mental health services within the community
- Limited educational and economic opportunities
- Low neighborhood support and cohesion





## Risk Factors and Determinants of Victimization and Perpetration of Human Trafficking and Related Violence *(Continued)*

### Societal

#### Victimization/Perpetration

- Cultural norms that reinforce shame and/or stigma associated with victimization
- Cultural norms that support asserting power and control over others
- Discriminatory practices, laws, and policies toward specific groups
- Harmful gender norms that perpetuate inequality and abuse across the gender spectrum
- History of colonization and forced assimilation
- Lack of funding and resources for services within underserved communities
- Lack of social compliance/due diligence in purchasing goods and services
- Market dynamics of high demand for limited goods and services
- Economic incentives that encourage low wages and maximized profits
- Media violence
- Societal income inequity
- Support for and/or tolerance of exploitative extractive industries and/or labor practices
- Weak health, educational, economic, and social policies/laws
- Weak sanctions against labor exploitation and other forms of interpersonal violence





## Protective Factors to Prevent Victimization and Perpetration of Human Trafficking and Related Violence<sup>3</sup>

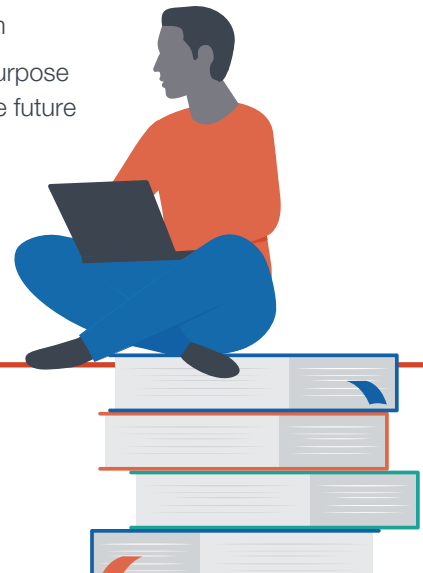
### Individual

#### Victimization

- Financial literacy
- Knowledge of human trafficking, rights, and resources

#### Victimization/Perpetration

- Able to develop skills for realistic planning (life, financial, safety) and the resources to implement plans
- Academic achievement
- Attitudes that reject violence, aggression, and/or exploitation
- Connection to culture and cultural traditions
- Connection to spiritual practices
- Emotional health and connectedness
- Healthy cognitive development
- Healthy understanding of relationships and boundaries
- Healthy/prosocial problem-solving, self-regulation, and communications skills
- Highly developed social skills/competencies
- Positive social orientation
- Self-esteem
- Sense of purpose and positive future



#### Perpetration

- Empathy and concern for how one's actions affect others
- Intolerant attitude toward violence

<sup>3</sup> Protective factors to prevent victimization and perpetration have been informed by the resources on violence prevention developed by the Division of Violence Prevention within the Centers for Disease Control and Prevention's National Center for Injury Prevention and Control, empirical literature, and input from experts in human trafficking and violence prevention. This is not an exhaustive list.



## Protective Factors to Prevent Victimization and Perpetration of Human Trafficking and Related Violence *(Continued)*

### Relationship

#### Victimization/Perpetration

- Ability to discuss problems with family
- Association with pro-social peers
- Caregivers who can and actively create safe, positive relationships with children
- Caregivers who can and actively practice nurturing parenting skills and provide emotional support
- Caregivers who can and actively meet basic needs of food, shelter, education, and health services
- Connection/commitment to school
- Connectedness to family or adults outside the family
- Families with strong social support networks and stable, positive relationships with the people around them
- Families where caregivers work through conflicts peacefully
- Families where caregivers can and are present and interested in the child
- Families where caregivers enforce household rules and engage in child monitoring
- Families with caring adults outside the family who can serve as role models or mentors
- Household financial security
- Involvement in social activities

### Community

#### Victimization

- Access to translation/interpretation services

#### Victimization/Perpetration

- Access to economic and financial help
- Access to pro-social (positive, helpful) activities
- Access to quality education
- Access to medical care, mental health, and substance use services that provide appropriate standards of care
- Access to comprehensive substance misuse prevention education and resources
- Access to safe, affordable, stable housing
- Access to safe, engaging after school programs and activities
- Access to quality health education
- Access to services for individuals who are at-risk or have experienced violence
- Community support/connectedness
- Coordination of resources and services among community agencies
- Laws and policies that support personal autonomy and decision-making
- Social compliance/due diligence in purchasing goods and services
- Uphold government-to-government relationship and respect tribal sovereignty through tribal consultations and implementing urban confer policies

#### Perpetration

- Practices, laws, and policies that hold individuals accountable for discrimination and abusive behaviors



## Social Determinants of Health

Human trafficking does not occur in a vacuum; rather, social determinants of health (SDOH) impact vulnerability for experiencing human trafficking. SDOH are conditions in which people are born, grow, work, live, and age, and they impact the health, well-being, and quality of life of individuals, families, and communities. The HHS Office of the Assistant Secretary for Health classifies SDOH into five domains:

- Economic Stability
- Education Access and Quality
- Health Care Access and Quality
- Neighborhood and Built Environment
- Social and Community Context

Broader political, environmental, and commercial conditions can inform SDOH.<sup>19,20,21</sup> SDOH can be positive or negative and include resources such as safe, affordable housing; access to education, technical careers, and employment opportunities; exposure to other forms of violence and discrimination, among other factors. SDOH contribute to health disparities and inequities, making certain people and communities more vulnerable for human trafficking than others.<sup>22</sup> As part of a public health approach, advancing positive SDOH by addressing systemic inequities and facilitating access to concrete supports such as quality health and behavioral health care, social and economic mobility, and additional protective factors is critical for achieving health equity and preventing human trafficking.

Figure 1: Social Determinants of Health





# Partners in Prevention

Preventing a multi-dimensional issue like human trafficking requires close coordination among diverse partners. Partnering across all levels of government and sectors of society will help unify efforts and achieve widespread impact. Below are some of the roles partners can play to prevent human trafficking. Note that one individual or organization may have multiple roles.

## Data Collector and Researcher

Data collectors and researchers can curate data and conduct research on the scale, scope, and prevalence of human trafficking and the impact of specific interventions to strengthen support for anti-trafficking efforts. Inclusive demographic data (e.g., sex assigned at birth, gender identity, sexual orientation, age, ethnicity, language, disability, etc.) can enhance understanding of who traffickers exploit and inform culturally responsive and age-appropriate prevention initiatives. Similarly, qualitative data and research, including interviews with people with lived experience can complement quantitative data to surface more comprehensive information on human trafficking trends and patterns. Research can help identify evidence-based strategies, evaluate programs and policies, and measure progress, leading to enhanced prevention measures and improved outcomes for people affected.

Emphasizing and researching common risk factors shared among human trafficking perpetration and other forms of violence perpetration can also help leverage funding and create more opportunities for research, for example on social determinants of health and protective factors that prevent trafficking.

## Educator

Educators can prevent and interrupt human trafficking by providing aid to impacted children, youth, and adults. They can equip individuals and communities with the knowledge and skills to prevent human trafficking, whether by raising awareness about human trafficking, healthy relationships, and labor rights in diverse settings (e.g., schools, workplaces, etc.); delivering training and technical assistance to prepare frontline professionals to provide trafficking-related services; or reaching high-risk populations through public outreach campaigns. Educators play a crucial role in building protective factors, including delivering education programs that help participants develop social-emotional skills, financial literacy, safe dating and relationship building, and online safety practices. Educators may also be the first to identify potential trafficking concerns and can make referrals for other needed services.

## Employer

Employers can promote human trafficking awareness training, post signage in the workplace that includes hotline contact information and monitor trafficking in their procurement of goods and services. Employers can also reduce vulnerabilities that put people at risk for human trafficking by strengthening their employees' physical and emotional well-being through person-centered, trauma-informed, and culturally responsive work environments. Actions can include ensuring financial security and pay equity, enforcing labor protections, mitigating bias and discrimination in hiring practices, and providing access to quality benefits. Another means is by implementing federal laws and regulations that prohibit recipients of federal grants and contracts (including subrecipients,





recruiters, and other agents) from engaging in human trafficking, the procurement of commercial sex, the use of forced labor, and acts that advance human trafficking.<sup>23</sup>

Employers can also consider training and hiring people who have experienced human trafficking and enhancing trauma-informed workplace practices. In addition, employers can recruit program consultants with expertise in human trafficking and exploitation to conduct organizational performance assessments that help determine whether organizations are properly recognizing and centering the voices of employees with lived trafficking experiences, from developing HR protocols to hiring for leadership roles.

### **Faith, Spiritual, and Cultural Leaders**

Faith, spiritual, and cultural leaders, including traditional Tribal spiritual leaders, may encounter people at risk for, currently experiencing, or who have experienced human trafficking among the communities they serve. Faith-based and community organizations bring well-developed networks; strong community trust; hope and healing through emotional and spiritual support; and long-standing expertise serving refugees, people who have experienced interrelated forms of violence, and other populations in need. They can also tailor services to their communities based on localized understanding and experience, and provide material assistance, such as food, clothing, and housing, as well as referrals to medical and legal providers.

Faith leaders can also communicate with community members through mentorship that shares important lessons around valuing your life, your identity, and your place within the faith community. By creating strong child protection and labor practices, faith, spiritual, and cultural leaders can model how to create systems and communities that center safety and well-being.

### **Funder**

Federal, state, tribal, territorial, and local governments and philanthropic and private organizations can fund existing and nascent programs, particularly those led by people with lived experience and individuals who represent the communities most directly impacted, that strengthen primary prevention efforts. Programs can facilitate access to services that build protective factors and support long-term well-being and deliver training and technical assistance to strengthen organizational capacity to address human trafficking. Funders can require funding recipients to incorporate trauma-informed, person-centered, culturally responsive, linguistically appropriate, and evidence-informed approaches throughout programs to foster equity, health, and well-being among communities and measure the quality of services based on feedback to ensure continuous improvement. They can also support funding recipients and sub-recipients to incorporate standards of care and reporting requirements; monitor progress; award those who partner with other community organizations to build holistic services; and provide more opportunities for smaller, grassroots organizations.

### **Health and Behavioral Health Care Provider**

Healthcare and behavioral healthcare providers, including nurses, forensic examiners, physicians, therapists, counselors, and more, can—with the appropriate training—identify and deliver patient-centered, trauma-informed, and culturally responsive care to people before trafficking has occurred, as well as during and after their trafficking experience. Clinicians can screen for social determinants of health—such as employment status, credit score, homelessness, and other environmental aspects—as part of primary health and behavioral health intakes





to determine the underlying components that cause and contribute to risk and violence. Delivering appropriate care to all patients, including by making care accessible (i.e., sliding scale, telehealth options) and providing universal education in clinical settings also build protective factors that can prevent human trafficking from occurring.

Healthcare systems can develop and enhance patient safety protocols and tools like anonymous patient safety portals, assessment tools, confidential documentation tools, facilitated referrals, and flagging features that alert relevant providers to patients' specific needs.

Healthcare administrators, procurement professionals, suppliers, and additional healthcare and public health sector decision-makers can play various roles in prevention efforts, including incorporating training on human trafficking for all staff, expanding access to affordable, comprehensive care, and addressing forced labor concerns in supply chains by monitoring and enforcing ethical product procurement and labor contracting practices.

## Individuals with Lived Experience

Individuals with lived experience in human trafficking are fundamental for the success of anti-trafficking programs and human trafficking prevention efforts. Lived experience experts can lead organizations, directly develop and expand survivor-informed services, advise and provide recommendations to strengthen anti-trafficking policies, inform or conduct research, and contribute to programs that improve awareness and understanding of human trafficking. People who have experienced human trafficking represent a diverse range of backgrounds and experiences and can serve in other

professional capacities outside of the trafficking prevention field.

## Law Enforcement Official

Members of law enforcement not only support efforts to hold perpetrators accountable by investigating possible cases of human trafficking but can help refer people to service providers in the area; provide a network of resources through a human trafficking task force; and provide certification to help individuals apply for immigration relief. Law enforcement officials play a key role in building trust with people who have experienced human trafficking by collaborating with community partners to provide holistic services, including access to resources for victims of crime. Law enforcement agencies can also develop, implement, and train their personnel on policies and procedures to ensure interactions with individuals who have experienced or are at risk for human trafficking are trauma-informed and person-centered. Trust between law enforcement officials and community partners can be established and strengthened when agencies consistently and transparently enforce misconduct policies and hold officials accountable for violence, abuse, and other forms of misconduct or unethical behaviors.

## Legal Advocates

Legal professionals and advocates can represent clients who have experienced human trafficking in legal proceedings providing victim statements; facilitate applications for immigration relief (e.g., Continued Presence, deferred action, T or U visas); assist with obtaining proper legal documentation; help with name changing procedures to ensure safety and privacy; and provide support in family custody, credit repair, and restraining order cases, among others. They can also coordinate with other partners in diverse sectors, including immigration, child welfare, and community-based organizations,



to develop and improve resources and tools that help prevent, identify, and address human trafficking concerns among specific populations. Legal advocacy that strengthens an individual's protective factors can be key to preventing human trafficking from occurring or reoccurring.

## **Policy Advocates and Makers**

Individuals, organizations, and communities can assist with and advocate for developing, implementing, and enforcing policies, laws, and regulations that build protective factors against and reduce risk factors for experiencing violence, including human trafficking. Partners can coordinate with community-based organizations and additional advocates to identify needs and facilitate access to concrete supports. Policy advocates and makers should also partner closely with people with lived experience to ensure any policy recommendations reflect the needs of the communities being served.

## **Public Health Professionals**

Public health professionals can help prevent human trafficking by implementing educational programs, recommending policies, administering services, and conducting research. Depending on their role, public health professionals can identify potential indicators of trafficking in businesses or homes; promote universal surveillance, screening, and systems of connection to preventative services; recognize trends among specific populations and occupations; adapt methods for preventing trafficking from other violence prevention initiatives; and measure the incidence of human trafficking in communities.

## **Procurement Professionals**

Professionals whose role it is to procure goods and services for their organization, such as health care supplies (e.g., medicine,

personal protective equipment), food, clothes, electronics, janitorial, direct care, and other goods and services, can leverage their organization's purchasing power by considering where they source and the impact of their purchasing decisions. Purchasers can actively seek information about how and where items were produced, recruitment practices, and working conditions for laborers in their supply chains. They can also share the information with other organizations in their industry and implement due diligence programs.

## **Service Provider**

Social service providers in various settings can provide individuals, families, and communities with programs and benefits that strengthen their health and well-being, ranging from those serving patients and clients at the intersection of human trafficking, domestic violence, and sexual assault; to child welfare professionals delivering services to children and youth at risk for or who have experienced human trafficking; and disaster management professionals connecting people to resources during and after emergencies.

## **Collective Impact**

Building upon the principles of multisector engagement that centers the public health approach, the Prevention Framework and accompanying activities can use a collective impact strategy to unite federal, state, tribal, territorial, and local governments; business, industry, and other private sector organizations; nonprofits and NGOs; philanthropic, faith-based, and research organizations; and individuals impacted by human trafficking to enhance the impact of cooperative efforts.

Comprised of five components, a collective impact strategy brings together organizations



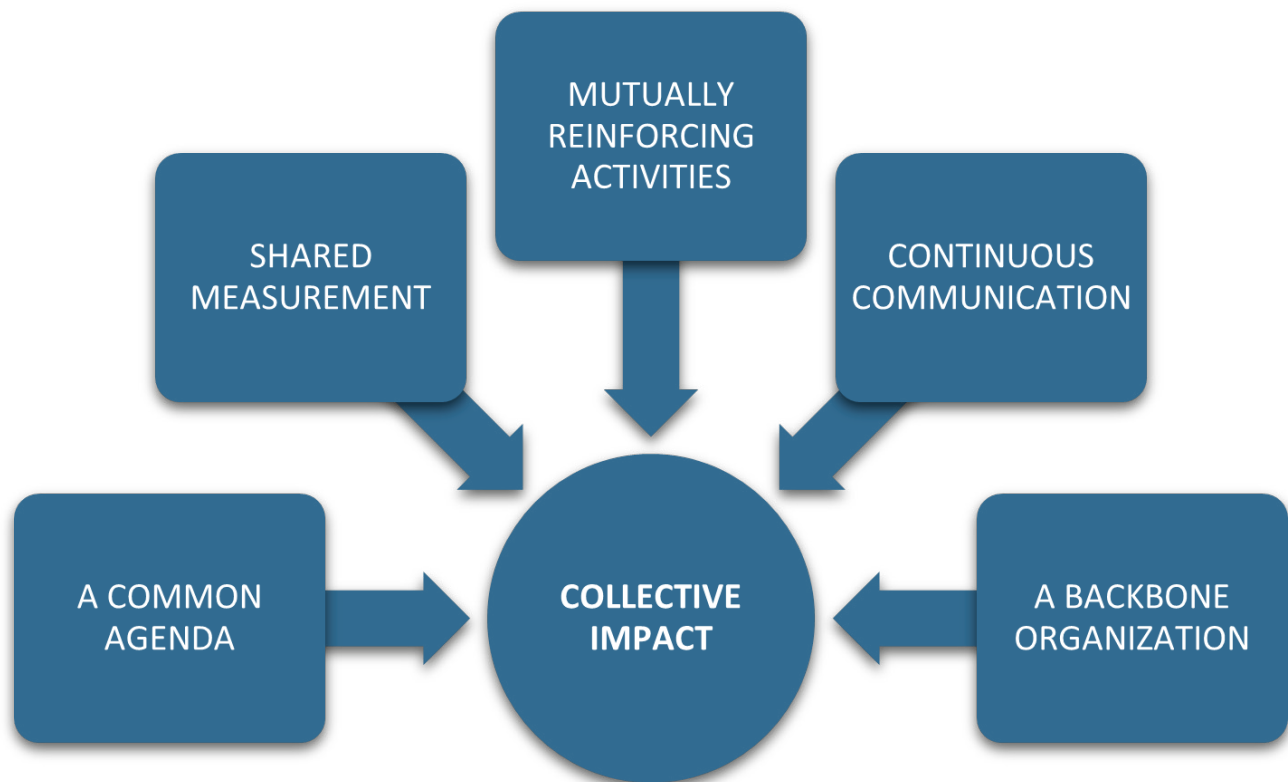
that typically operate independently to achieve social change (Figure 2).<sup>24</sup>

The **common agenda** (e.g., the strategies and approaches outlined in the framework) proposes shared definitions and creates a mutual understanding of the framework's goals among all collaborators. **Shared measures** can ensure consistent data reporting and evaluation of results, enabling collaborators to identify successes and areas needing improvement. Data collection should safeguard all personally identifiable information that is considered sensitive, consistent with applicable federal, state, local, and tribal laws regarding privacy

and obligations of confidentiality, including compliance with 45 CFR § 75.303(e), the Privacy Act of 1974, the Freedom of Information Act (FOIA), the Federal Records Act, and any other applicable federal laws.

The **activities** that align with each strategy and approach in a collective impact framework are **mutually reinforcing** to maximize efforts and achieve the highest level of impact. Partners will maintain **continuous communication** to build relationships and trust among all collaborators, supported by a **backbone** organization coordinating with internal and external collaborators.

**Figure 2: Collective Impact Framework (Collective Impact Forum)**





# Guiding Principles

The Prevention Framework is grounded in five principles that guide each strategy and approach. These principles are core elements that should drive the development of any human trafficking prevention activities. Although goals, strategies, and approaches may fluctuate, guiding principles remain unchanged. While each guiding principle holds equal value, they often overlap, strengthen, and contribute to the success of one another.

Guiding Principles
<ul style="list-style-type: none"><li>• Equity and Inclusivity</li><li>• Evidence-Based Approaches</li><li>• Multidisciplinary Collaboration</li><li>• Person-Centered Approaches</li><li>• Two-Generation/Whole Family Approaches</li></ul>

## Equity and Inclusivity

People of all races, ethnicities, nationalities, religions, sexes, gender identities, sexual orientations, disabilities, and ages can experience human trafficking; however, research indicates that certain populations experience a higher level of risk because of underlying social, cultural, and political factors.<sup>25,26</sup> These groups include but are not limited to:

- People of Color (POC), including Asian, Black, Hispanic, and Latino individuals and people who are two or more races
- Indigenous peoples, including American Indians, Alaska Natives, Native Hawaiians, and Pacific Islanders

- Two-Spirit, lesbian, gay, bisexual, transgender, queer, questioning, intersex, and/or asexual individuals (2SLGBTQIA+) and persons who identify as additional sexual and gender identities
- People with disabilities (e.g., physical, cognitive, intellectual, sensory, developmental, emotional)
- Youth who are system involved or disconnected from stable support networks
- Foreign national persons, particularly individuals who are undocumented

Historical and contemporary forms of oppression create and contribute to social and economic disparities that put certain communities at increased risk for human trafficking. Ingrained biases, deep-rooted cultural norms, and shame and stigma may also cause certain communities, like men and boys, to remain under-identified or to receive improper care that does not address their unique needs. Inequitable service provision and barriers to accessing support can contribute to continued cycles of abuse and vulnerabilities.

Effective efforts to prevent human trafficking should decrease risk factors and increase protective factors. Non-discriminatory practices should incorporate standards of care grounded in principles of diversity, equity, and inclusivity tailored to the needs of the individual or population. Prevention efforts should actively seek to eliminate barriers to healthcare, housing, education, employment, immigration relief, and other institutions and ensure equitable access to culturally specific and holistic support systems.





## Resource Spotlight

The Office on Trafficking in Persons' (OTIP) resource on [How to Improve Services for Males Experiencing Trafficking](#) provides behavioral health and social service providers with a way to engage and build rapport with male clients and to address each client's specific risk factors related to human trafficking at the individual, relationship, community, and societal levels. The fact sheet aligns each factor with suggestions on how to build rapport with male clients, leverage universal education and motivational interviewing techniques to engage in meaningful conversations that may encourage male clients to understand their risk factors, differentiate between what trauma and exploitation is and what it is not, and to commit to accessing services.

Organizations implementing strategies and approaches in the Prevention Framework should consider the critical deficit in responsive resources for populations who are underserved, to include in crisis-response programs related to homelessness or other risk factors, and those who live in rural areas or areas with limited services. The promotion of equity and inclusivity is important to ensure all who are at risk of or experience human trafficking have access to resources and services that will build their resiliency to human trafficking, as suggested by the U.S. Advisory Council on Human Trafficking.<sup>27</sup>

## Accessibility

People with disabilities may lack access to social support networks and crucial protective factors that decrease risks for human trafficking, including education and employment opportunities, because of stigmas, biases, and inadequate accommodation. As such, prevention efforts that elevate accessibility ensures everyone is protected and has access to the resources they need. Strong disability-inclusion programs acknowledge the diversity of disabilities—physical, cognitive,

or intellectual, sensory, developmental, emotional—and consider diverse experiences, preferences, and skills. Ensuring compliance with disability rights laws, such as the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, as amended, and Section 1557 of the Affordable Care Act of 2010, will help ensure services and resources are flexible, intuitive, respectful, and responsive to diverse physical and communication needs.

Appropriate and effective prevention efforts also promote language accessibility, as language differences can prevent people from seeking out, accessing, and receiving resources and services. Accessible language removes barriers and helps ensure all people, including those with limited English proficiency and varying literacy levels, can get the information they need. Strategies for strengthening language accessibility can include hiring bilingual providers, trained and qualified interpreters, and providing easy-to-understand print and multimedia materials that reflect the language(s) used in the communities served.

## Embedding Lived Experience

People with lived experience—who reflect the communities being served—have invaluable expertise that can inform and be incorporated into all aspects of human trafficking prevention measures. Their knowledge extends beyond their direct human trafficking experience and includes professional, academic, and innate skillsets. Meaningfully engaging a diverse group of individuals who have different human trafficking experiences, as well as those who have experienced other forms of violence and/or circumstances that put them at increased risk for human trafficking, will provide crucial insight on how to develop policies and programs, and to deliver responsive services that effectively meet the needs of those impacted by this issue. People with lived



***“Marginalized communities, including [People of Color], are often disproportionately targeted by traffickers given the unique vulnerabilities associated with their intersectional identities. However, members of these same communities have historically been excluded from opportunities to share their lived experiences and expertise, especially among federally funded programs that aim to provide services for those exploited.”***

– [Human Trafficking Leadership Academy Class 7](#)

experience can have diverse roles in prevention programs, including as advisors, consultants, grantees, and employed staff. Engagement that involves people with lived experience should be compensated at a rate commensurate with other subject matter experts. Additionally, investing in the long-term stability and development of people with lived experience well after their initial period of stabilization will support them in their ability to engage meaningfully in leadership within the field.

### Resource Spotlight

The U.S. Department of Justice (DOJ) Office for Victims of Crime’s (OVC) [Practical Guide: Survivor-Informed Services](#) provides information and practical tools to help service providers create intentional partnerships with people with lived experience in human trafficking. Additionally, OVC’s [Principles of Survivor Engagement in the Anti-Trafficking Field](#) outlines three core principles service providers should consider when designing, implementing, and evaluating person-centered and trauma-informed service provision.

Despite the elevated risk experienced by communities that have been underserved and marginalized, they, along with people who have experienced labor trafficking and boys and men, are often underrepresented in

leadership opportunities.<sup>28</sup> Engaging those with lived experience in program development and decision-making processes is vital to creating sustainable solutions, developing programs that meet diverse needs, and building trust. Partners can establish protocols and policies that promote flexibility and accommodation and provide ongoing support to ensure continued improvement.<sup>29</sup>

The U.S. Advisory Council on Human Trafficking promotes inclusion in ways that respect lived experiences, maintain individual integrity, and foster meaningful and trusting relationships. The Council recommends that the federal government and all partners developing human trafficking policies and programs:

- Promote the delivery of technical assistance and capacity building so that survivor-led organizations become successful and sustainable in the antitrafficking movement.
- Support the continued building of strong and long-term partnerships with survivors.
- Aim to ensure appropriate and varied survivor representation in the review of and feedback on initiatives, campaigns, and products.<sup>30</sup>



Partners implementing the strategies and approaches of the Prevention Framework can integrate survivor-informed leadership respectfully and attentively, including by intentionally identifying and incorporating input from POC, Indigenous, 2SLGBTQIA+, and additional communities who have inequitable access to networking opportunities. Meaningful engagement requires navigating a careful balance between allowing people to self-identify and providing them with the space to do so without being exclusionary. Partners can promote on-going allyship by continually incorporating feedback and applying lessons learned.

### Resource Spotlight

---

OTIP's [Toolkit for Building Survivor-Informed Organizations](#) is a collection of new and existing resources that builds the organizational capacity to meaningfully collaborate with and support staff, volunteers, and consultants with lived experience in human trafficking. The toolkit is a resource for anti-trafficking organizations, coalitions, task forces, volunteer programs, and other community and faith-based organizations that want to improve collaboration with those impacted by human trafficking. The toolkit provides guidance, tools, and resources that support professionally engaging people with lived experience when developing, delivering, and evaluating programs and policies.

---

### Resource Spotlight

---

The U.S. Department of Education's (ED) [Human Trafficking in America's Schools: How Schools Can Combat Human Trafficking in Partnership With People With Lived Experience](#) describes ways schools can partner effectively with people with lived experience of trafficking, and explores some of the unique benefits these consultants offer.

---

## Evidence-Based Approaches

Reliable, accurate, and impartial data should inform human trafficking prevention strategies. Rigorous data collection with disaggregated and granular data that enable thoughtful analysis can help identify trends and generate an informed understanding of where human trafficking happens, how it occurs, who it impacts, and what approaches are most effective in preventing human trafficking from occurring or recurring. This information is crucial when assessing needs, and developing and scaling focused prevention, intervention, and rehabilitation efforts that effectively address inequities and disparities that sustain human trafficking. Data-driven, evidence-based approaches, established through programmatic research and evaluation, prevalence studies, screening tools, and other methods, will provide better insight into the root causes of human trafficking, help reduce the incidence of trafficking, and improve service delivery to people who have experienced human trafficking.

The U.S. Advisory Council on Human Trafficking consistently recognizes the importance of data in human trafficking prevention efforts. In their 2019 Annual Report, the Council recommended all federal agencies within the PITF “seek to increase data collection efforts within their authority to gather more detailed information about underserved populations to better inform agencies’ resource allocations and service offerings to trafficking victims/survivors”<sup>31</sup> through thoughtful, intentional, inclusive, and purposeful engagement. Subsequent reports continue to stress the importance of data collection; in 2021, the Council urged PITF agencies to strengthen coordination to collect and analyze data, particularly related to labor trafficking,<sup>32</sup>





***“Collecting data on underserved victim populations is essential to understand what is happening in the field, and which sectors or communities are most affected and need services. Knowledge is power and properly collected data would provide a clearer picture of the issues facing all human trafficking victims, including those who are underserved.”***

– [U.S. Advisory Council on Human Trafficking Annual Report 2019](#)

and in 2022 the Council called for increased “research and data collection on generational trauma and its effects on human trafficking ... to inform the creation of enhanced and safer systems that ... prevent trafficking.”<sup>33</sup>

Partners can consider data standardization when building data-driven approaches to preventing human trafficking, while ensuring any information collected respects client autonomy and confidentiality. Different entities may have differing ideas about what data needs to be collected, and this can lead to varying data standards and formats as well as insufficient service coordination. Through the [Human Trafficking Data Collection Project](#), HHS is examining current data collection practices to establish standards and definitions for data collection on human trafficking while emphasizing confidentiality, privacy, and information security. It is important to promote equity and inclusivity when building evidence bases, critiquing presumptions and recognizing that diverse methodological approaches and perspectives are invaluable for effective research.<sup>34</sup>

### Resource Spotlight

---

The Substance Abuse and Mental Health Services Administration’s (SAMHSA) [Adapting Evidence-Based Practices for Under-Resourced Populations](#) provides information and tools to culturally incorporate evidence-based practices for under-resourced populations, including tailoring care, programs, and services to the cultural, social, gender, and demographic contexts of the people served to yield positive outcomes.

---

## Multidisciplinary Collaboration

People at risk for, currently experiencing, or who have experienced human trafficking have unique and diverse needs and require comprehensive services to facilitate their health and well-being. Multi-sectoral partnerships, including coordination amongst health and behavioral health care professionals, social service providers, legal aid practitioners, school-based professionals, community organizers, faith and spiritual leaders, cultural leaders, and additional potential partners, will help align goals, leverage capacity, allocate resources, and bolster coordinated services to build protective factors against human trafficking and support people who have experienced human trafficking.

**Figure 3: Multi-Sector Partnerships**

When building multidisciplinary treatment and referral teams, members should consider immediate, medium-term, and long-term needs, recognizing these needs will evolve and members will have different roles and limitations but contribute equally to achieve wider impact. Strengthening collaboration across disciplines can increase information sharing and inform a more thorough understanding of human trafficking, leading to more innovation, efficient processes, and increased success in achieving shared objectives. When collecting information, partners should ensure patients' and/or clients' personally identifiable information remains confidential and they consent to information being collected and shared. With coordinated support from diverse systems of care, individuals, families, and communities will have increased access to resources designed to reduce risks and strengthen protections.

## Person-Centered Approaches

Emphasizing dignity, autonomy, and self-determination, person-centered approaches recognize that people are experts in their own experiences, promote the safety and well-being of individuals, and minimize potential re-traumatization associated with interventions (e.g., criminal justice procedures).<sup>35</sup> They can reduce power imbalances when working with people who have experienced human trafficking and other forms of trauma. Person-centered approaches can include providing trauma-informed, culturally responsive, and linguistically appropriate support through advocacy and service providers; helping people who have been affected by human trafficking actively engage in decision-making regarding their recovery; and creating space for them to explore opportunities to improve



their personal and professional lives. Person-centered approaches recognize that people are more than their human trafficking experience and take into consideration how additional experiences that occur across a lifespan can impact a person's sense of self.

## Trauma-Informed Approaches

Trauma-informed approaches acknowledge people have experienced trauma from their human trafficking experience and/or another event in their lives and seek to address this trauma, prevent re-traumatization, and build resilience to future violence.<sup>36</sup> According to SAMHSA, "a program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices."<sup>37</sup> Trauma-informed approaches at each stage of the social-ecological model (individual, relationship, community, societal) can decrease stigmatization and shame associated with experiencing violence, including human trafficking.<sup>38</sup>

## Resource Spotlight

Funded by SAMHSA, the National Child Traumatic Stress Network's (NCTSN) [Creating Trauma-Informed Systems](#) and [Crossover Youth and Trauma-Informed Practice](#) describe how to create trauma-informed child-serving systems and how child-serving systems can improve their trauma-informed interventions to improve their response to the needs of youth, respectively.

Trauma can be transmitted across generations within a community and its descendants.<sup>39,40</sup> Trauma-informed approaches recognize how specific cultural, regional, racial, or ethnic groups can experience historical or intergenerational trauma triggered by the collective memory of major events and lived experiences of oppression (e.g., forced migration, colonization, genocide, slavery) or through physiological factors.<sup>41</sup> When left unaddressed, historical trauma is often exacerbated by inequity and unequal access to resources that may manifest in health disparities, substance use, mental illness, self-harm, and other acute issues that may compound with each generation.<sup>42</sup>

**Figure 4: Guiding Principles to a Trauma-Informed Approach**





When working with people who have experienced human trafficking, it is critical to recognize and understand the impact of historical trauma. Like other forms of adverse childhood experiences, historical trauma increases the risk of a wide range of health problems, including experiencing human trafficking as a form of violence. It also results in psychological and psychosocial issues such as defense mechanisms, developmental disorders, and behavioral issues, as well as depression, anger, isolation, violence, suicide, shame, substance use, and anxiety.<sup>43,44</sup> Sustained, ongoing service provision that directly addresses these intersecting issues is necessary to alleviate ongoing cycles of trauma.

### Resource Spotlight

---

Access to behavioral health treatment is an important component for healing. Programs implemented through SAMHSA's [National Child Traumatic Stress Initiative – Category III: Community Treatment and Service \(CTS\) Centers](#) funding opportunity increase access to effective trauma- and grief-focused treatment and service systems for children, adolescents, and their families, who experience traumatic events. With this program, SAMHSA raises the standard of care and improves access to evidence-based services for children experiencing trauma across the nation.

---

## Culturally Responsive and Linguistically Appropriate Approaches

People who have experienced human trafficking have various cultural, ethnic, and faith/spiritual backgrounds and speak different languages. Culturally responsive and linguistically appropriate approaches honor individuals by understanding their core needs, strategically designing services and materials to meet those needs, and conducting

multilingual follow-through services to ensure sustained care.<sup>45</sup> The [HHS National Standards for Culturally and Linguistically Appropriate Services \(CLAS\)](#) outline 15 action steps that help advance health equity, improve quality of services, and reduce health disparities.<sup>46</sup>

Culturally responsive and linguistically appropriate approaches recognize that culture, language, and location and place influence how people experience, interpret, and respond to trauma, whether as a source of strength and resiliency or as a barrier to accessing services. They also acknowledge the complexity of identities—the diversity within individual cultures—and that cultural humility is an ongoing process responsive to evolving experiences. To effectively prevent human trafficking, partners should understand, adopt, and implement strategies that support the needs of diverse populations and ensure equitable care, which includes implementing multilingual and culturally responsive public outreach campaigns and hiring staff who reflect the cultures and languages in the communities being served.

## Two-Generation/Whole Family Approaches

The effects of human trafficking often extend beyond the individual directly impacted and affect entire families. Two-generation/whole family approaches acknowledge the intergenerational effects of human trafficking and other forms of trauma, abuse, and exploitation. They are inclusive of nuclear, extended, and multi-generational, and chosen families, and engage adults and children simultaneously to identify opportunities to strengthen family units and prevent violence from occurring. Two-generation/whole family



approaches create opportunities for and address the needs of children and the adults in their lives, suggesting that children and adults succeed when everyone's needs are met.<sup>47,48</sup> The Aspen Institute identifies the following six key components of a two-generation approach: 1) early childhood education; 2) K–12 education; 3) postsecondary and employment pathways; 4) economic assets; 5) health and well-being; and 6) social capital.<sup>49</sup> These approaches focus equally and intentionally on services and opportunities for children and adults while concurrently articulating and tracking outcomes for whole families.<sup>50</sup> Integrated services that meet the needs of both children and adults will strengthen the development of support programs to prevent human trafficking.

Two-generation/whole-family approaches acknowledge the intergenerational effects of human trafficking and other forms of trauma, abuse, and exploitation and engage adults and children simultaneously to identify opportunities to strengthen family units and prevent violence

from occurring. For example, a family-centered lens can include focusing equally on high-quality educational services for children and workforce development services for the adults in their lives. Linking support streams will foster a family's resilience, build capacity, and promote upward mobility.

Because adults and children have interconnected and interdependent relationships, providing holistic services inclusive of familial units can benefit everyone. As Class 3 of the Human Trafficking Leadership Academy note in their Recommendations Report, building protective factors among families and communities, including economic stability, stable housing, access to mental health care, and other social supports, is crucial for preventing human trafficking among children.<sup>51</sup> Two-generation/whole-family approaches strengthen healthy family environments by supporting the adult and child equally and, when used appropriately, can create a legacy of social and economic security, and prevent human trafficking across generations.

***“Whole families must be considered in helping survivors overcome and heal. Many survivors have children who have been negatively affected by their parent’s trafficking experience and what they have seen and heard. We must lift up parents and children together with services and supports that will help them be safe, find financial stability, and be empowered to find new opportunities.”***

– [U.S. Advisory Council on Human Trafficking Annual Report 2019](#)





# Strategies and Approaches

## Definitions

The Division of Violence Prevention (DVP) within the Centers for Disease Control and Prevention's (CDC) National Center for Injury Prevention and Control (NCIPC) published resources on preventing intimate partner violence, suicide, youth violence, sexual violence, child abuse and neglect, and adverse childhood experiences (ACES).<sup>52</sup> Each prevention resource contains a series of the best available evidence-based strategies and approaches to prevent or reduce violence.<sup>53</sup> The Prevention Framework uses the same structure and definitions as the CDC violence prevention strategies and approaches (see Key Terms).

### Key Terms

- **Strategy:** Lays out the direction or actions to achieve the goal of preventing violence.
- **Approach:** Provides specific ways to advance the strategy through programs, policies, and practices.

– CDC Prevention Resources

## Applying the Framework

Research indicates that people at risk for or who have experienced human trafficking may experience poly-victimization (i.e., exposure to multiple forms of violence).<sup>54,55,56</sup> There is conclusive evidence that multiple types of violence often co-occur and exist along a continuum, and individuals who experience one form of violence are at greater risk to experience other forms of violence.<sup>57,58,59</sup> Evidence also confirms that many forms of violence share common risk and protective factors.<sup>60,61</sup>

Considering these significant conclusions, the Prevention Framework adopts many strategies and approaches proposed within the CDC's resources on preventing violence and those outlined in the Prevention Institute's Spectrum of Prevention. New strategies and approaches specific to human trafficking are also included and based on existing literature and recommendations in written reports from the [U.S. Advisory Council on Human Trafficking](#), the [National Advisory Committee on the Sex Trafficking of Children and Youth in the United States](#), and the [Human Trafficking Leadership Academy](#).

The strategies and approaches within the Prevention Framework apply to different levels of the social-ecological model. Designed for broadscale change, they address individual behaviors and relational, communal, and societal factors that influence risk and protective factors for violence.<sup>62,63</sup> Because human trafficking prevention strategies are relatively less developed and evaluated than prevention strategies for other forms of violence, the evidence supporting the strategies and approaches listed varies. As strategies and approaches are developed, tested, and scaled, partners can evaluate new and existing programs, policies, and practices within different contexts and settings to strengthen evidence bases. Collaborators are encouraged to use the strategies and approaches in combination to yield a multi-level, multi-sector effort to prevent violence and to evaluate activities in a systematic way to assess their individual and collective impact.<sup>64</sup>



The following acronyms identify sources that informed the strategies and approaches in the Prevention Framework.

- **CC:** Comply Chain: Business Tools for Labor Compliance in Global Supply Chains<sup>65</sup>
- **CA&N:** Child Abuse and Neglect Prevention Resource for Action: A Compilation of the Best Available Evidence<sup>66</sup>
- **IPV:** Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence<sup>67</sup>
- **S:** Suicide Prevention Resource for Action: A Compilation of the Best Available Evidence<sup>68</sup>
- **SP:** Prevention Institute's Spectrum of Prevention<sup>69</sup>
- **SV:** Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence<sup>70</sup>
- **YV:** Youth Violence Prevention Resource for Action: A Compilation of the Best Available Evidence<sup>71</sup>

National Human Trafficking Prevention Framework: Strategies and Approaches		
	Strategy	Approach
Individual	1. Strengthen skills to promote self-efficacy and prevent human trafficking <sup>SP, SV, YV, IPV</sup>	Skills-based education programs <sup>SP, SV, YV, IPV, CC</sup>  Social, emotional, and behavioral well-being programs for children, youth, and adults <sup>IPV, SV, S</sup>
	2. Identify and support people at risk for or who have experienced human trafficking to increase safety and reduce harm <sup>IPV, CA&amp;N, SV, YV</sup>	Human trafficking training for professionals and community leaders <sup>SP, CC</sup>  Needs assessment and screening  Treatment to reduce the harm of exposure to violence and neglect <sup>CA&amp;N, SV, YV, IPV</sup>  Treatment to disrupt the developmental pathways toward violence <sup>CA&amp;N, SV, YV</sup>  Safe reporting and communication channels to request assistance <sup>CC</sup>  Services in underserved areas and for underserved populations  Intervention during periods of acute risk <sup>S</sup>
	3. Strengthen economic supports <sup>S, IPV, CA&amp;N, SV</sup>	Household financial security <sup>SV, IPV</sup>  Housing programs <sup>YV, CA&amp;N, IPV</sup>  Leadership development and opportunities for individuals with lived experience <sup>SV</sup>  Quality education and employment opportunities





National Human Trafficking Prevention Framework: Strategies and Approaches		
	Strategy	Approach
<b>Relationship</b>	4. Promote family environments that support healthy development <sup>YV, CA&amp;N</sup>	Maternal, paternal, infant, and early childhood home visiting programs <sup>CA&amp;N, YV, IPV</sup>  Family preservation, caregiver skills, and family relationship programs <sup>CA&amp;N, YV, IPV</sup>
	5. Promote social connectedness <sup>S, YV</sup>	Community and school engagement activities <sup>S, SV, YV</sup>  Mentoring and peer-to-peer support programs <sup>YV</sup>  Support for social integration  Cultural preservation  Freedom of association and personal freedom <sup>CC</sup>
<b>Community</b>	6. Create protective environments <sup>IPV, S, SV, YV</sup>	Well-established and consistently applied workplace policies and practices <sup>SV, CC</sup>  Human trafficking risk assessments <sup>CC</sup>  Policies and programs to address school and community-level risks through environmental approaches <sup>YV, SP, IPV, SV</sup>
	7. Foster multidisciplinary networks and coalitions <sup>SP</sup>	Shared protocols for preventing and responding to human trafficking <sup>SP</sup>  Federal, statewide, countywide, or locality-wide coordination <sup>SP</sup>  Data standardization and interoperability  Stakeholder engagement in social compliance systems <sup>CC</sup>
<b>Societal<sup>4</sup></b>	8. Promote social norms that protect against violence <sup>SV</sup>	Programs to engage bystanders <sup>SV, IPV</sup>  Programs to mobilize allies <sup>SV, IPV</sup>  Community education, awareness, and outreach <sup>CA&amp;N</sup>  Public reporting on social compliance performance and engagement <sup>CC</sup>  Policies, practices, and program development that promote prevention

<sup>4</sup> Programs that seek to change social norms within the contexts of relationships and communities need to be implemented widely in order to have societal-level impact.



## Strategy 1: Strengthen Skills to Promote Self-Efficacy and Prevent Human Trafficking (Individual Level)

Programs that strengthen individual knowledge and skills build resiliency to human trafficking victimization and perpetration by promoting self-efficacy—the belief in one’s ability to succeed—and instilling the knowledge, attitudes, and behaviors that can improve health outcomes. Evidence demonstrates that strengthening skills is a protective factor in preventing multiple forms of violence, including sexual violence, intimate partner violence, child abuse maltreatment, teen dating violence, and youth violence.<sup>72,73</sup> Traffickers frequently exploit vulnerabilities stemming from these experiences as part of their grooming and recruitment tactics. Building resiliency by addressing known risk and protective factors is critical for preventing both labor and sex trafficking.<sup>74</sup> Partners should implement programs associated with this strategy broadly and ensure they are research-based and theory-driven.<sup>75,76,77,78</sup>

### Approaches

**1.1 Skills-based prevention education programs**, sometimes referred to as “empowerment-based training,” focus on building a person’s self-efficacy, strengthening their ability to assess risk and engage in harm reduction strategies, and equipping them to respond to high-risk or exploitative situations.<sup>79,80</sup> Programs to reduce the risk of human trafficking can be integrated into existing comprehensive violence prevention education programs or developed as a supplementary program. It is important to ensure that efforts

to increase education on human trafficking complement existing prevention programs strategies and do not dilute them. Curricula can include activities related to identifying abusive behavior, obtaining and providing consent, establishing boundaries, managing conflict and emotions, safety planning, financial literacy, and “know-your-rights” trainings, particularly as they relate to understanding labor protections, that promote self-advocacy and protect against exploitation. Programs also focus on reducing barriers to exiting exploitative situations; engaging in help-seeking behavior; and increasing access to resources, services, and grievance mechanisms. Experts with lived experience in human trafficking often recommend delivering skills-based prevention education to populations with high susceptibility to human trafficking (e.g., children and youth, people working in industries with high prevalence of human trafficking), with many noting they were not aware of what human trafficking was until they experienced it firsthand or encountered a provider during or after their exploitation.<sup>81,82</sup>

### Resource Spotlight

The Administration for Children and Families (ACF) implements the [Human Trafficking Youth Prevention Education Demonstration Program](#), which funds local education agencies (LEAs) to develop and implement programs to prevent human trafficking victimization by providing skills-based human trafficking training and education for school staff and students. LEAs also create and implement a Human Trafficking School Safety Protocol for handling suspected and confirmed cases of human trafficking in a person-centered, trauma-informed, culturally responsive, and linguistically appropriate manner.



## Resource Spotlight

ACF funds the [National Resource Center on Domestic Violence](#) to develop online resources for the Special Collection on Human Trafficking, Domestic Violence, and Sexual Assault which includes resources that address the intersection of human trafficking, domestic violence, and sexual violence. It includes resources for social service providers and legal advocates working directly with survivors, as well as recommendations for preventing and combatting human trafficking. State and local organizations working in this arena are highlighted throughout.

## Resource Spotlight

The U.S. Department of Labor's (DOL) [Worker.gov](#) is a one-stop resource center to help workers understand their rights and access resources.

## Resource Spotlight

The [READY4Life project](#), funded by ACF, strengthens and promotes healthy relationships and marriage through education and comprehensive case management that will support an overall goal of helping youth build healthy relationship skills while supporting positive socio-emotional development and promoting successful transitions to young adulthood. READY4Life addresses the unique challenges faced by the focus population, such as access to minimal financial resources, limited or no formal education, and trauma experienced prior to being resettled. The project serves youth aged 14 to 24, including refugee and immigrant youth; individuals receiving or who previously received Temporary Assistance for Needy Families (TANF) and individuals who are eligible for TANF assistance; non-custodial and custodial single parents; low-income, at-risk individuals; parenting youth; individuals with disabilities; and other eligible demographics, with a focus on underserved populations.

**1.2 Social, emotional, and behavioral well-being programs for children, youth, and adults** help people, including those with disabilities and who speak diverse languages, understand how to manage emotions, develop positive communication and problem-solving skills, build empathy, disrupt harmful patterns, and learn to constructively and healthily manage conflict.<sup>83,84</sup> In addition to educating participants about violence, these programs, such as relationship counseling and cultural community programs, change how participants think and feel about violence and provide opportunities to practice and reinforce skills.<sup>85</sup> Partners can train peer mentors and navigators to reinforce program objectives and de-escalate conflict, when appropriate. Partners can also design programs to align with school-based restorative practices that foster healthier school environments and allow students to learn from their mistakes.<sup>86</sup>

## Strategy 2: Identify and Support People at Risk for or Who Have Experienced Human Trafficking to Increase Safety and Reduce Harm (Individual Level)

Preventing human trafficking requires supporting people with a history of victimization and intergenerational trauma, including those who have experienced human trafficking, and increasing the capacity of professionals to identify those who may be experiencing trafficking or exhibit high-risk indicators.<sup>87,88</sup> Person-centered, trauma-informed, and culturally responsive approaches that support early identification of potential risk and facilitate early intervention and treatment for the initial



victimization can be an effective tool to prevent human trafficking from occurring or reoccurring.<sup>89</sup> When appropriate, interventions should incorporate consistent follow-up to ensure individuals receive quality care and support that is responsive to their unique needs. Evidence-based treatment programs for individuals at high risk for perpetrating violence can also reduce future harm.<sup>90,91,92</sup> Partners implementing programs associated with this strategy should ensure they are informed by the best available evidence.

## Approaches

**2.1 Human trafficking training for professionals and community leaders** working with people at risk for, currently experiencing, or who have experienced human trafficking, as well as those working with supply chains where human trafficking may occur, will help them identify risk and protective factors that affect populations disproportionately vulnerable for human trafficking, including those who are traditionally underserved; recognize indicators of all human trafficking typologies; and build skills to respond in a way that reduces harm and prevents future risk.<sup>93,94,95</sup> As trainings are established, it is important to prioritize reaching individuals in diverse settings; incorporate adult learning principles; build on participants' existing skill sets; be ongoing to account for high rates

of staff turnover or transfers and the latest tools and research; and incorporate cultural competency and humility, bias reduction, and non-traditional healing practices.<sup>96</sup> With adequate training, professionals who regularly interact with populations and supply chains affected by human trafficking can create protocols to reduce hurdles to obtaining services and use their interactions to provide anticipatory guidance; facilitate connection to resources, including Victims of Trafficking in Persons T Nonimmigrant Visas (T visas), Victims of Criminal Activity U Nonimmigrant Status Visas (U visas), child eligibility letters, adult certification letters, etc.; and provide information about healthy sexual relationships, high-risk situations for human trafficking, common recruitment techniques, and/or resistance strategies.<sup>97,98</sup>

## Resource Spotlight

The nationally recognized and accredited [HHS SOAR to Health and Wellness \(SOAR\) training program](#) prepares diverse health and human service professionals to identify and respond to those at risk for, currently experiencing, or who have experienced human trafficking and connect them with the resources they need using a trauma-informed, person-centered approach. SOAR Online delivers on-demand training modules tailored to equip professionals with the knowledge and skills to address human trafficking in their workplace.



SOAR Online	
Foundational Modules	Advanced Modules
<ul style="list-style-type: none"> <li>• SOAR to Health and Wellness</li> <li>• Trauma-Informed Care</li> <li>• Culturally and Linguistically Appropriate Services</li> <li>• SOAR for School-Based Professionals</li> <li>• SOAR for Indigenous Communities</li> <li>• Disaster Management: Prevention and Responding to Human Trafficking</li> </ul>	<ul style="list-style-type: none"> <li>• SOAR for Sexual Assault Nurse Examiners</li> <li>• Ethical Considerations: Working with Individuals Who Have Experienced Trafficking</li> <li>• Universal Education and Screening</li> <li>• Working with Individuals with Substance Use and/or Co-Occurring Disorders</li> <li>• Working with Foreign National Minors Who Have Experienced Trafficking</li> <li>• Responding to Human Trafficking Through the Child Welfare System</li> <li>• SOAR for Procurement Professionals</li> </ul>

### Resource Spotlight

The NCTSN, which is funded by SAMHSA, provides a variety of [resources](#) to improve professionals' capacity to serve survivors of child sex and labor trafficking and their families from the lens of trauma and trauma-informed care.

### Resource Spotlight

Framework, a training and technical assistance project funded by OVC, worked with survivors, service providers, and other experts to provide individualized assistance and create tailored, engaging, and user-friendly resources. Framework's [multimedia library](#) offers free event recordings, one-pagers, skill-practice case studies, and survivor experience videos that can be edited to meet individual educational needs.





## Resource Spotlight

---

The Health Resources and Services Administration (HRSA) funds [Health Partners on IPV + Exploitation](#), a National Training and Technical Assistance Center, to provide health centers training in trauma-informed services, partnerships and policy development, and the integration of processes designed to increase the identification and referral to treatment for individuals impacted by intimate partner violence and human trafficking. Health Partners provides training through [learning collaboratives](#) and offers an extensive technical assistance [resource library](#). Example resources include a [Protocol for HRSA-supported Community Health Centers to Engage Patients through Universal Education Approaches on Exploitation, Human Trafficking, Domestic Violence and Intimate Partner Violence \(IPV\)](#) and the [IPV Health Partners Toolkit](#) to help healthcare settings partner with social service organizations to build a comprehensive response to IPV and human trafficking.

---

Law enforcement officials, legal aid professionals and advocates can become familiar with [Continued Presence, U and T visas](#), and other immigration [options](#) and [benefits](#) for foreign national adults and children who have experienced human trafficking.

**2.2 Implementing a needs assessment and screening tool** is an important practice to help partners identify immediate and long-term needs for individuals at risk for, currently experiencing, or who have experienced human trafficking.<sup>99,100</sup> Tools should be informed by professionals with lived experience, rely on rigorous scientific evidence, and be validated through testing with the intended population and setting.<sup>101,102,103</sup> While screenings should not be a barrier to accessing necessary services, partners can implement them in

various settings, including but not limited to, hospitals, schools, child welfare organizations, immigrant service organizations, substance use treatment centers, and shelters, to connect people to trafficking-specific services. Partners should develop clear and consistent guidelines on when and how to implement needs assessments and screening tools (e.g., whether they will take a universal or selected approach) and ensure all individuals conducting the assessment and/or screenings have received appropriate training.

## Resource Spotlight

---

OTIP's [Adult Human Trafficking Screening Tool](#) (AHTST) is designed for use across various health care, behavioral health, social services, and public health settings in order to assess adult patients or clients for human trafficking victimization or risk for potential trafficking victimization. It is a survivor-centered, trauma-informed, and culturally responsive intervention tool. The eight screening questions that make up the AHTST are designed to be short, minimally invasive, and closed-ended. The overall aim of the AHTST is to obtain only the basic information needed to identify an adult currently or at risk of being trafficked so that practitioners can offer appropriate services, including referrals.

---

## Resource Spotlight

---

In its report on [Best Practices and Recommendations for States](#), the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States published a list of validated screening and assessment tools to help professionals apply trauma-informed principles to identify children and youth who have experienced trafficking and provide appropriate referrals to supportive and culturally responsive services.

---





Human Trafficking Screening Tools					
Tool	In-Depth	Short/ Rapid	Demographic	Environment	Available Online
Commercial Sexual Exploitation-Identification Tool (CSE-IT)		X	Ages 10+; sex trafficking only	Multiple settings, including child welfare and juvenile justice systems, schools, homeless youth shelters, healthcare, and mental health settings	X
Human Trafficking Interview and Assessment Measure (HTIAM-14)		X	Homeless youth; sex and labor trafficking	Service provider setting	X
Human Trafficking Screening Tool (HTST/HTST-SF)	X	X	Ages 18-24; sex trafficking only	Runaway and homeless youth system settings	X
Quick Youth Indicators for Trafficking (QYIT)		X	Homeless youth; sex and labor trafficking	Service provider setting	X
Short Screen for Child Sex Trafficking		X	Ages 12-18; sex trafficking only	Healthcare setting	X
Vera Institute's Trafficking Victim Identification Tool (TVIT)	X	X	Ages 13+; sex and labor trafficking	Not specified	X

### Resource Spotlight

Funded by SAMHSA, the NCTSN's [trauma-informed mental health assessment](#) offers a structured framework for (1) gathering information across several key domains of functioning, (2) identifying and addressing the needs of children and families exposed to traumatic events, and (3) coding and summarizing this information, so that it can be communicated to families and other providers.

**2.3 Treatment to reduce the harm of exposure to violence and neglect** is critical for preventing future victimization and perpetration of violence. Although most people who experience violence do not act violently, those

victimized or exposed to violence are at higher risk for experiencing future violence or inflicting harm on others.<sup>104</sup> Treatment should be holistic, person-centered, trauma-informed, culturally responsive, linguistically appropriate, and, when relevant, incorporate two-generation/whole family approaches.<sup>105</sup> Partners can connect people who have experienced violence to community-based organizations and service providers, who can facilitate access to wide-ranging treatment including mental health services, intensive case management, family reintegration, cultural and spiritual-based programs, and individual and group therapy programs.



## Resource Spotlight

---

OTIP's [Multidisciplinary Treatment and Referral Team](#) fact sheet includes examples of potential community partners, including healthcare providers, legal professionals, community-based organizations, social service providers and public health professionals and how each partner can support a response to human trafficking. A vital component of responding to human trafficking is looking beyond your own organization to collaborate across sectors. A comprehensive multidisciplinary treatment and referral team can work together to meet the various needs of an individual experiencing human trafficking and their family members.

---

**2.4 Treatment to disrupt the developmental pathways toward violence** intervenes early, often in adolescence, when factors associated with violence perpetration are first indicated. This approach can mitigate the consequences of exposure to violence and prevent the continuation and escalation of problem behavior and violence into adulthood.<sup>106</sup> The etiology of violence and aggression can be influenced by biological, psychological, and socioeconomic factors, often simultaneously, with violence sometimes manifesting as a trauma response and/or survival mechanism.<sup>107</sup> Programs may include individual and family therapeutic interventions, educational initiatives, or mentoring by influential adults and peers.

## Resource Spotlight

---

CDC's [Youth Violence webpage](#) and [VetoViolence website](#) host a variety of multimedia resources including videos, fact sheets, program information and a library of resources on violence prevention. The resources address the impact violence has on the lives of youth and those they interact with, such as family members, peers, school-based professionals, and their communities.

---

## Resource Spotlight

---

The [Shared Framework for Reducing Youth Violence and Promoting Well Being](#), from DOJ's Office of Juvenile Justice and Delinquency Prevention, aims to strengthen collective action to reduce youth violence and ensure the health, safety, and well-being of children, youth, families, and communities. The framework details the importance of working across sectors to prevent and eliminate violence and improve child well-being, through evidence-based, comprehensive approaches that address the multiple factors that impact violence, including individual, peer, family, parent relationships, community influences, and societal factors.

---

**2.5 Safe reporting and communication channels to request assistance** are important services for people experiencing or who have experienced violence and can reduce barriers to help-seeking behavior. In their 2018 recommendations to HHS, the National Advisory Council on Migrant Health highlighted the fear of "dismissal, threats to notify the police or IRS, isolated housing and other forms of exploitation" as a barrier to reporting violations and seeking help.<sup>108</sup> To prevent further victimization, people who experience human trafficking must have safe, confidential ways to report abuse and seek support without fear of disclosure, judgment, or reprisal. Providers should seek to strengthen reporting channels to ensure confidential information is protected and be trained to handle the immediate and long-term needs of individuals seeking help, including educating them about their rights, or have clear protocols in place to provide referrals to organizations with necessary resources.<sup>109</sup> Using person-centered, trauma-informed approaches that emphasize consent, confidentiality, and the option to choose when or if to self-disclose



will help build trust among those impacted by human trafficking by making them active participants in how their cases are handled. Direct outreach and point-of-contact services are both important strategies to reduce barriers to reporting and increase access to services.<sup>110</sup> Additionally, organizations can ensure safe, accessible grievance channels are available to workers in their supply chains to lodge complaints to their employers and labor recruiters.<sup>111,112</sup>

### Resource Spotlight

Funded by ACF, the [National Human Trafficking Hotline](#) is a 24/7, confidential, multilingual resource that provides information and service referrals for people at risk for, currently experiencing, or who have experienced human trafficking. People can contact the Hotline through call, text, webchat, or email and receive immediate support through safety planning and connection with resources in their area, including case management, legal advocacy, health and mental health care, and assistance locating and securing emergency or permanent housing.

### Resource Spotlight

Workers may contact the [DOL Wage and Hour Division](#) (WHD) at 1-866-4-US-WAGE (1-866-487-9243) for questions about wage rights. All discussions, including complaints, are free and confidential. The worker's name and the nature of the complaint will not be disclosed to their employer. The only time DOL WHD would share such information is when necessary to pursue an allegation, and it would only do so then with the worker's permission, or if required by a court. DOL WHD enforces the law regardless of the worker's immigration status.

### Resource Spotlight

OVC published interactive [Child Victims and Witness Support Materials](#) for children and youth impacted by human trafficking. These short graphic novels focus on young sex and labor trafficking survivors' experiences, plus accompanying booklets that focus on victim's rights and roles as they interact with the justice system. Caregiver and practitioner guides are available for those supporting children who have experienced trafficking.

**2.6 Enhancing services in underserved areas and for underserved populations**—including POC, Indigenous peoples, 2SLGBTQIA+ individuals, people with disabilities, foreign nationals, returning citizens, and men and boys—is vital for protecting individuals who often experience the highest levels of risk and most limited access to services.<sup>113</sup> Partners should directly coordinate with communities who have been underserved to ensure services are culturally responsive and adapted to meet their unique needs, including by enabling access for people who do not speak English. Providers should consider safe, directed outreach opportunities that mitigate access barriers and reduce potential harm.

### Resource Spotlight

Through the [Victims of Human Trafficking in Native Communities Demonstration \(VHT-NC\) Program](#), ACF funds organizations to build, expand, and sustain organizational and community capacity to deliver comprehensive services to Native American adults and children who have experienced human trafficking. The VHT-NC Program is informed by a whole family approach that focuses equally and intentionally on services and opportunities for clients and their immediate family members living within their households.



## Resource Spotlight

---

Through the [Aspire: Child Trafficking Victim Assistance Program](#) (Aspire) and the [Trafficking Victim Assistance Program](#) (TVAP), ACF funds organizations to provide national coverage of comprehensive case management and other supportive services to foreign national children and adults who have experienced human trafficking.

---

## Resource Spotlight

---

The Preventing Trafficking of Girls initiative is designed to develop or enhance prevention and early intervention services for girls who are at risk or are experiencing sex trafficking. Youth Collaboratory, OVC's training and technical assistance provider, works with program sites to prevent and reduce the victimization of Black girls vulnerable to sex trafficking by expanding the skills of program providers and other collaborators working to prevent the trafficking of Black girls. In a [three-part video series](#), they amplify several voices from the field including direct service professionals, researchers, youth and young adults with lived expertise, and multidisciplinary providers.

---

## Resource Spotlight

---

In response to recommendations from the U.S. Advisory Council on Human Trafficking, ACF funded training and technical assistance activities to increase attention on men and boys as an underserved population. OTIP established a technical working group of subject matter experts and implemented subsequent listening sessions through its National Human Trafficking Training and Technical Assistance Center (NHTTAC). The [Listening Sessions on Men and Boys Meeting Minutes](#) report is the result of two listening sessions. The first session explored risk factors and barriers to accessing services. The second session built on the first, exploring protective and resiliency factors to inform enhanced services for men and boys.

---

**2.7 Intervention during and after periods of acute risk**, such as natural disasters, homelessness, migration, and transition out of child welfare or justice systems, supports individuals when they are extremely vulnerable. In these situations, traffickers take advantage of increases in demand, such as the sudden demand for low-wage laborers to support rebuilding efforts after a natural disaster, the hope that comes with a job opportunity or supportive relationship that seems too good to be true, and the urgency to meet basic needs. Anticipatory guidance that provides individuals with information and resources that can help keep them safe is an effective prevention tool.<sup>114,115,116</sup> Consistent post-intervention follow-up will ensure people receive ongoing, responsive care and demonstrate continuous improvement. Efforts should include dissemination strategies that ensure information is accessible to audiences who speak diverse languages.

Research suggests that youth involved in the child welfare system, particularly those who run away or are experiencing homelessness, are at increased risk for human trafficking.<sup>117,118</sup> Programs designed to strengthen supports for parents, caregivers, and children can prevent child welfare involvement and, for children and youth who enter the child welfare system, help foster parents create and sustain safe, nurturing environments that can prevent youth from experiencing runaway episodes while in foster care, particularly those who have established patterns of running away. By creating safer environments and placements, these programs can decrease the frequency and duration of time youth are missing from care and diminish the risk for experiencing human trafficking or its recurrence.<sup>119,120,121,122</sup>



## Resource Spotlight

[Responding to Human Trafficking among Children and Youth in Foster Care and Missing from Foster Care](#) is a joint Information Memorandum (IM) from the Administration on Children, Youth and Families (ACYF); Children's Bureau (CB); Family and Youth Services Bureau (FYSB); and OTIP within ACF created to elevate resources available to assist states in meeting legal requirements intended to protect children and youth in the child welfare system, from negative outcomes associated with human trafficking. The IM provides an overview of federal statutes related to human trafficking among children and youth in the child welfare system and highlights resources to meet those requirements.

## Resource Spotlight

FYSB's [Human Trafficking Prevention: Strategies for Runaway and Homeless Youth Settings](#) explores strategies to integrate human trafficking prevention into Runaway and Homeless Youth (RHY) programs. These strategies emphasize the vital role that RHY programs can play in the prevention of sex and labor trafficking among runaway and homeless youth. The issue brief also highlights the importance of integrating public health, trauma-informed, and positive youth development principles in the development and implementation of prevention interventions.

Post-release services for people released from incarceration are essential in preventing future incarceration and increasing stable employment. Reintegration into the community after incarceration can intersect with health, housing, education, employment, family, faith, and community well-being.<sup>123</sup> Post-release services should be person-centered and trauma-informed, emphasizing autonomy and safety while enabling clients to take an active role in the development of their reintegration plan.

## Resource Spotlight

DOJ's [Reentry Partnerships: A Guide for States & Faith-Based and Community Organizations](#) offers practical recommendations for how state government officials and community-based service providers can better use limited resources to help people released from prisons and jails successfully and safely rejoin neighborhoods and families.

## Resource Spotlight

The [Reentry Resource webpage](#), from the HHS Office of Minority Health, is a collection of available reentry resources for individuals and organizations assisting people leaving the criminal justice system.

## Resource Spotlight

[Workable Solutions for Criminal Record Relief: Recommendations for Prosecutors Serving Victims of Human Trafficking](#), produced by the American Bar Association and funded by OVC, outlines the ways attorneys and other legal aid professionals can facilitate trauma-informed post-conviction criminal record relief, thereby minimizing the risk of revictimization.

## Strategy 3: Strengthen Economic Supports (Individual Level)<sup>124,125</sup>

People experiencing economic and financial insecurity, such as unemployment, poverty, or homelessness, can have increased vulnerability for human trafficking. Similarly, people who have experienced human trafficking often have complex trauma that impacts their financial resources and well-being.<sup>126</sup> Financial needs change over time, beginning with immediate needs such as food, housing, and emergency





***“Survivor mentorship and empowerment are the keys to helping survivors with their reintegration into the community and society so they can truly be free and independent. Providing survivors with education, job training, and job placement are important elements to help survivors sustain their life. Also encouraging survivors in their leadership capacity will help government and NGOs do better in their anti-trafficking work.”***

– [U.S. Advisory Council on Human Trafficking Annual Report 2017](#)

medical care. Later, individuals may have intermediate needs, such as transitional housing and ongoing medical and behavioral health care, followed by long-term needs, including life skills training, job training, and financial assistance.<sup>127</sup>

Offering choice and flexibility within programs and services is key to achieving long-term sustainability for those impacted by human trafficking. Allowing adults and youth agency over their lives—such as allowing them to choose where they want to live through housing voucher programs, what skills they want to build by offering a variety of education and training programs, and what supportive services they need—helps them thrive long term.

Addressing socioeconomic factors can greatly improve various health outcomes for individuals, families, and communities and is a critical component of two generation/whole family approaches. Low-barrier access to immediate funding assistance and implementing strategies that support long-term financial stability and independence may also reduce financial dependence on potential perpetrators.

---

### Resource Spotlight

Informed by the expertise of people with lived experience of human trafficking and other anti-trafficking professionals who represent organizations providing economic empowerment programming, the [Understanding Key Concepts of Economic Empowerment for People Who Have Experienced Human Trafficking](#) brief defines several key concepts related to economic empowerment. These concepts include economic empowerment, financial stability, financial literacy, self-sufficiency, professional development, and economic mobility as they relate to people who have experienced human trafficking.

---

---

### Resource Spotlight

Published by ACF, [Economic Empowerment for People Who Have Experienced Human Trafficking: A Guide for Anti-Trafficking Service Providers](#), was developed through listening sessions and a community reflection session with economic empowerment program participants and system professionals as well as an environmental scan of organizations/programs in the United States that provide economic empowerment services to people with lived experience of human trafficking and other specialized populations. This resulting guide was developed for organizations considering starting, expanding, or refining economic empowerment programs serving people with lived experience of human trafficking by sharing key findings and recommendations for programming and strategies and considerations for applying these recommendations.

---





## Approaches

**3.1 Household financial security** can mitigate risks associated with multiple forms of violence, such as poverty, low income, financial stress, and gender inequality.<sup>128</sup> Financial insecurity, including debt bondage, can be a driving factor for human trafficking and an after-effect of an individual's exploitation. Policies and programs designed to increase household financial security, such as providing a living wage and access to affordable childcare, housing, health and behavioral healthcare, and nutrition, can interrupt factors that lead to human trafficking. Survivors of human trafficking experience significant financial impacts, and efforts to counter those effects should be inclusive and focused on a whole-person health approach.<sup>129</sup>

### Resource Spotlight

The [Federal Housing and Economic Mobility Resources](#) IM provides an overview of federally funded programs, training, and other resources to increase access to housing and employment for people who have experienced human trafficking. The IM was created by ACF in collaboration with the DOL Employment and Training Administration and members of the Federal Interagency Human Trafficking Housing Workgroup for federal agencies, regional offices, anti-trafficking service providers, and other advocates.

**3.2 Long- and short-term housing, and emergency shelter programs**, implemented in coordination with other wraparound services, provide safety and stability to people at risk for and who have experienced human trafficking, reducing their risk for future human trafficking victimization.<sup>130</sup> With safe housing secured, people can focus on other needs that will enhance their well-being and that of their children.<sup>131</sup> In developing housing programs, partners should ensure availability to all populations, including men

and boys, 2SLGBTQIA+ individuals, people with disabilities, older adults, and additional groups who are underserved and experience inequitable access to resources.<sup>132</sup> Partners should attempt to avoid situating housing options in areas with high levels of reported crime and incorporate policies that create custom programs responsive to diverse needs, as residents will require varying housing terms. Partners can invest in programs that facilitate long-term housing stability, including support with achieving home ownership, and intentionally avoid creating barriers to access, including behavioral and employment requirements.

### Resource Spotlight

Developed by the HHS Office of the Assistant Secretary for Planning and Evaluation in partnership with DOJ OVC, the [Domestic Violence Housing First Demonstration Evaluation](#) adds to the knowledge base about housing and advocacy interventions for survivors of domestic violence and their children. Unstably housed domestic violence survivors who received the Domestic Violence Housing First (DVHF) model – including housing-related advocacy and/or flexible financial assistance – reported several positive changes at 6-, 12-, 18- and 24-months after seeking services. Evidence indicates that the DVHF model is more effective than services as usual (SAU) in helping survivors achieve housing stability, safety, and improved mental health over 24 months.



## Resource Spotlight

---

The [Federal Housing and Homelessness Programs for Human Trafficking Survivors](#) resource produced by ACF provides a detailed summary of how survivors of human trafficking may meet the eligibility requirements for federally funded housing and homelessness programs. Survivors of human trafficking routinely identify housing and shelter among their top needs. Research suggests evictions can lead to increased unemployment; therefore, accessing and maintaining housing is critical to survivors' economic mobility and self-sufficiency.

---

## Resource Spotlight

---

OVC's [Housing Assistance Grants for Victims of Human Trafficking](#) assists with emergency housing, transitional housing assistance, and short-term housing assistance. With funding from OVC, recipients improve the quality and quantity of housing services offered to people who have experienced human trafficking by increasing the capacity of service providers nationwide and strengthening their national, state, and local partnerships with collaborators working in housing systems.

---

## Resource Spotlight

---

The 2018 Family First Prevention Services Act established criteria for federally funded treatment centers, also known as [Qualified Residential Treatment Centers \(QRTPs\)](#), that provide live-in services to youth struggling with psychological, behavioral, and/or substance issues when they are too ill or require services that are not available in a less secure (or restrictive) environment. These provisions ensure that group placements are made only when youth require specific therapeutic treatments that cannot be administered in a family setting and require that placements be high-quality, time-limited, and receive appropriate judicial review and oversight. Limiting the use of congregate care facilities, stabilizing placements, increasing family connections, and achieving permanency so that no youth "ages out" of foster care can help to reduce the number of young people vulnerable to trafficking.

---

**3.3 Leadership development and opportunities for individuals with lived experience** can lead to increased self-sufficiency and economic mobility. When given the opportunity—and the requisite training and support—survivors can provide substantive recommendations to inform research, policies, and programs, and partners should compensate these individuals at a professional rate.

**3.4 Quality education and employment opportunities** can strengthen economic stability and job security. Interventions include skill building, job readiness and career counseling, job and vocational training, and supported employment. Community-based workforce development initiatives can outline and discuss career options of interest and strategies for finding employers, inclusive of apprenticeships that can lead to alternative modes of employment and economic mobility, and facilitate opportunities through national, state, and local partnerships. Partners can ensure education and employment programs are accessible by reducing language and financial barriers.

## Resource Spotlight

---

[Building Partnerships and Collaborations with Workforce and Education Systems – A step-by-step guide on how to form partnerships with education and workforce programs to create trafficking survivor economic security](#) provides an overview on why collaborations are fundamental to survivor safety, economic stability, and healing and how to build successful partnerships with specifically workforce development agencies. The guide, developed with support from OVC, provides a detailed process of forming a collaboration and partnership between victim services agencies and workforce development or education programs.

---



## Resource Spotlight

The [Promoting Employment Opportunities for Survivors of Trafficking Training and Technical Assistance Project](#) operated by Futures Without Violence, in coordination with OVC, increases access to quality educational and sustainable employment opportunities for people who have experienced human trafficking. Futures Without Violence supports service providers and allied organizations in the human services and workforce development field through its Peer Economic Empowerment Learning Collaborative, Partnering to Open Economic Pathways Institute, and Survivor-Led Employment Success Program, as well as through national webinars and technical assistance calls.

## Strategy 4: Promote Family Environments That Support Healthy Development (Relationship Level)<sup>133</sup>

The family environment plays a key role in shaping physical, emotional, social, and behavioral health. For children, the family environment has a strong influence from early childhood through late adolescence and beyond. Early childhood experiences and family stressors can significantly affect a person's long-term health and well-being.<sup>134,135</sup> Many survivors of human trafficking have shared that the need for familial connection, love, and belonging contributed to their vulnerability to recruitment by traffickers who promised to meet this need.<sup>136,137</sup>

Family connections are powerful in preventing human trafficking and helping survivors successfully exit and recover from their trafficking situation.<sup>138</sup> Nurturing and supportive family environments where caregivers are able to and actively create warm and caring relationships with children, monitor children's

activities and friendships, set age-appropriate expectations and rules, and use consistent and nonviolent discipline significantly lower the risk for youth violence and other adolescent health risk behaviors.

When working with people who have experienced human trafficking, including family-based trafficking, or significant family disruption, partners should allow survivors to self-determine (choose) their family, related or unrelated, rather than adhering to a strict family-of-origin definition.<sup>139</sup>

## Approaches

**4.1 Maternal, paternal, infant, and early childhood home visiting programs** provide information; caregiver support; and training about child health, development, and care to families in their homes and can effectively reduce the risk of violence.<sup>140</sup> Home visiting programs can also strengthen early relational health and facilitate positive long-term outcomes for children and caregivers.<sup>141</sup> Home visiting programs may be delivered by health professionals (e.g., nurses, physical therapists, speech-language pathologists), social service providers, or other professionals/paraprofessionals.<sup>142</sup> It is important to recognize that people may feel vulnerable when inviting an organization to provide services in their home—particularly within communities that have experienced systemic discrimination or historical or intergenerational trauma. Partners can work to build trust with prospective participants by providing in-home support services delivered by professionals in the participants' community and implementing person-centered, trauma-informed, culturally responsive, and linguistically appropriate programming throughout program recruitment and implementation. Home visiting programs can provide a unique opportunity to identify needs and facilitate access to critical resources



to enhance the family’s physical, emotional, and economic well-being (e.g., programs to support access to food, healthcare, education, and childcare).

### Resource Spotlight

---

HRSA’s [Maternal, Infant, and Early Childhood Home Visiting \(MIECHV\) Program](#) supports pregnant people and parents with young children who live in communities that face greater risks and barriers to achieving positive maternal and child health outcomes. Families choose to participate in evidence-based home visiting programs, and partner with health, social service, and child development professionals to set and achieve goals that improve their health and well-being. Eligible entities funded under the HRSA MIECHV Program must prioritize providing services to populations with higher risks as outlined in the Social Security Act, Section 511(d)(5), which may include serving communities at high risk for human trafficking.”

The program aims to:

- **Improve:** maternal and child health
  - **Prevent:** child abuse and neglect
  - **Reduce:** crime and domestic violence
  - **Increase:** family education level and earning potential
  - **Promote:** children’s development and readiness to participate in school
  - **Connect:** families to needed community resources and supports
- 

### Resource Spotlight

---

The [National Responsible Fatherhood Clearinghouse](#), managed by HHS, provides resources for fathers, practitioners, programs/ Federal grantees, states, and the public at-large who are serving or interested in supporting strong fathers and families.

---

## 4.2 Family preservation, parent and caregiver skills, and family relationship programs

strengthen home environments and build family supports to prevent human trafficking and help people who have experienced human trafficking rebuild relationships with their families to prevent re-victimization. Family support and connectedness is a protective factor against multiple forms of violence, including child maltreatment, teen dating violence, youth violence, and bullying.<sup>143</sup> Partners implementing programs within this approach can focus on reducing family surveillance and unnecessary intervention, and building parental empowerment, family reintegration to establish healthy family dynamics, or education—for both children and adults—on how to set boundaries or have difficult conversations.

### Resource Spotlight

---

Fellows from Class 3 of the Human Trafficking Leadership Academy with diverse professional backgrounds and expertise, including survivor leaders, worked together to develop [recommendations](#) on how to enhance service provision to survivors of human trafficking or those at risk of human trafficking using trauma-informed practices and survivor-informed principles. Recommendations were based on three subject areas: 2-Generation Resource Centers, Education as Prevention, and Access to Mental Health and Substance Use Treatment.

---

### Resource Spotlight

---

The [Family Self-Sufficiency for Individuals Who Have Been Trafficked Literature Review](#), developed by OTIP’s NHTTAC, provides an overview of family self-sufficiency and programs, explores the connection between family self-sufficiency and trafficking, and discusses recommendations for increasing family self-sufficiency among survivors of trafficking. The report is intended to inform efforts to support survivors of trafficking and their families.

---





## Strategy 5: Promote Social Connectedness (Relationship Level)

Social connectedness supports healthy development and is a proven protective factor for preventing violence and mitigating risk at the individual and community levels. Lack of social connection, especially among individuals, groups, and communities who have historically been underserved and marginalized, can leave people vulnerable to human trafficking schemes that exploit their need for love and connection or lack of social capital. Social capital provides valuable networks and relationships that enable people who have experienced human trafficking to obtain tangible and intangible benefits, from job or housing assistance to emotional support.

Connectedness occurs at all levels of the social-ecological model, including between individuals, families, schools, and other organizations. Social connectedness is crucial during local, regional, national, or international disasters or crises, such as the COVID-19 global pandemic. Social connectedness can include positive attachments between youth, their families, and organizations in their community and strong formal relationships between organizations and support services to ensure that services promote a client's sense of well-being. Partners can support existing initiatives occurring within these communities or develop activities within this strategy in coordination with people who represent the communities being served and, when possible, allow them to implement activities.

### Approaches

**5.1 Community and school engagement activities** provide opportunities for children, youth, and young adults to develop and

practice leadership, decision-making, self-management, and social problem-solving skills, as well as develop supportive relationships with pro-social peers and caring adults.<sup>144</sup>

Community support and connectedness are protective factors against child maltreatment, intimate partner violence, sexual violence, and youth violence.<sup>145</sup> Connection with and commitment to school and school staff, fostered through a positive school climate, are also protective factors that can prevent teen dating violence, sexual violence, youth violence, and bullying—forms of violence that often precipitate human trafficking victimization.<sup>146</sup>

After-school programs, ongoing programs and access to safe spaces through local nonprofits or community centers, community events that prioritize social connection, collaborations with local businesses to expose young people to career opportunities, informational events that provide individuals and families with resources and information related to health care, housing assistance, legal and financial services, transportation, food, clothing, and other basic needs can provide crucial opportunities to build connection within communities. Community and school engagement activities should be inclusive and accessible to people from diverse backgrounds, including those with limited financial resources, irregular work schedules, and special education needs.

### Resource Spotlight

To help schools and districts improve school climate, the [National Center on Safe Supportive Learning Environments, funded by ED](#), has developed the [School Climate Improvement Resource Package](#).

The Resource Package includes a variety of resources to meet a range of needs among those interested in improving school climate, including engagement.



## 5.2 Mentoring and peer-to-peer support programs

connect individuals and organizations, building relationships that enhance growth, skill development, and achievement of goals. Connection with a supportive adult and pro-social peers are primary protective factors for several risk factors, including homelessness, teen dating violence, and youth violence.<sup>147,148</sup> Some mentoring programs connect children and youth with caring adults, while peer-to-peer programs connect youth and adults with others who have experienced similar situations to support their achievement of personal goals.<sup>149</sup> Peer-to-peer support programs can also be implemented with individuals supporting family members through difficult experiences. These programs should be accessible and inclusive of all communities, including people who have experienced human trafficking or additional forms of violence, and encourage long-term support.

Peer-to-peer supports may be one-on-one, such as peer mentor or peer navigators, or they may involve multiple peers, as in peer support groups. Peer mentors often have participated in a program, while peer navigators typically connect individuals to services and may act as case managers. Peer support groups tend to focus on building social networks and connections.<sup>150</sup> In some instances, institution-to-institution mentoring is employed to build capacity at the organizational level.<sup>151</sup> Mentors and peer mentors/navigators may benefit from anticipatory training topics, such as harm reduction and de-escalation techniques and mental health first aid.

## Resource Spotlight

---

Participating in peer support groups can lead to positive outcomes for individuals with substance use disorders, but not all peer support programs are trauma-informed, and it is unclear whether they are the best fit for individuals who experience human trafficking. The [Peer-to-Peer Brief](#), a resource from OTIP's NHTTAC, describes the process of planning and providing training and technical assistance to a survivor-led organization that is piloting a peer-led, evidence-based, and trauma-informed program called Seeking Safety with individuals who are experiencing trafficking and a substance use disorder.

---

**5.3 Support for social integration** is a critical protective factor for individuals living in the United States. While some people may want to pursue English-language training, increasing accessibility within communities for non-English speakers and ensuring educational awareness materials are culturally responsive is also crucial, as limited or restricted communication increases barriers to seeking assistance and reporting violence.

## Resource Spotlight

---

When working with individuals who prefer communicating in a different language other than English, it is important to have trained and qualified interpreters on hand to help you communicate. [Working with Interpreters](#), a fact sheet from OTIP's NHTTAC, details considerations for selecting and preparing to work with an interpreter.

---

**5.4 Cultural preservation** encourages individuals to remain connected to and use cultural and religious practices to improve their well-being. Cultural connectedness is an identified protective factor in several socio-ecological domains,<sup>152</sup> and religious beliefs are a protective factor against violence perpetration.<sup>153</sup>





## Resource Spotlight

The ACF [Domestic Victims of Human Trafficking \(DVHT\) Program](#) funds comprehensive case management, direct services, and referrals through community partnerships to U.S. citizens and Lawful Permanent Residents who have experienced human trafficking. Prime grant recipients must incorporate culturally responsive and traditional healing practices into the project design and implementation, if appropriate. Cultural wisdom and traditional practices are fundamental to achieving behavioral health improvements today and effecting change for future generations. Recipients must provide, or arrange for, services to be provided in a manner that is sensitive to the age, culture, religion, dietary needs, native language, disability, sexual orientation, gender identity, and other important individual needs of each client.

## Resource Spotlight

Human Trafficking Leadership Academy Class 5 fellows consisted of a team of allied professionals and survivor leaders with indigenous backgrounds and diverse cultures, traditions, and expertise. The fellows worked together to develop [recommendations](#) on how culture could serve as a protective factor in preventing trafficking among Native American youth. The report also examines the historical context and continued impact of human trafficking on Indigenous communities as well as their unique risk and resilience factors.

**5.5 Freedom of association** enables workers to participate in safe and secure forms of workplace dialogue—individually and collectively—to protect themselves against coercion, deception, discrimination, or other forms of exploitation.<sup>154</sup> **Personal freedom** is also important (e.g., the ability to see family, pursue religious activities, socialize, communicate privately outside the workplace)

to prevent employers from creating an environment of isolation.<sup>155</sup>

## Resource Spotlight

The [Conducting Migrant Worker Interviews](#) tool, which is part of the Responsible Sourcing Tool site and was developed by a labor rights NGO in partnership with the U.S. Department of State, provides a set of sample interview questions to use when conducting targeted interviews of migrant workers and other employees, who may have been recruited provided by labor recruiters and agents in order to better identify risks of human trafficking or human trafficking-related practices. The questions also include those related to freedom of association and personal freedom.<sup>156</sup>

## Strategy 6: Create Protective Environments (Community Level)

Strong community environments help prevent human trafficking. Approaches that promote social and physical environments that improve safety and social connections can bolster violence prevention.<sup>157</sup> Efforts must include a focus on reducing risks and implicit bias within communal environments, promoting cultural responsiveness, and building protective factors and buffers to violence.<sup>158</sup>

### Approaches

**6.1 Well-established and consistently applied workplace policies and practices** protect everyone, including those at risk for violence such as human trafficking. Workplace sexual harassment is a form of sexual violence and also creates conditions that encourage other forms of sexual violence.<sup>159,160</sup> Workplace policies, including safe and consistent



reporting mechanisms, can address risk factors for violence and create healthy organizational environments. Established policies help employees and managers know what is expected of them with regards to violence, bullying, and harassment, including exploitation in supply chains, and understand how to report grievances. Workplace policies should be regularly reviewed and revised, and implementation and enforcement should be monitored and evaluated.<sup>161,162</sup>

### Resource Spotlight

---

[The Responsible Sourcing Tool Base Toolset](#), developed through a collaboration between Verité and the U.S. Department of State, provides guidance on creating effective management systems to prevent human trafficking in global supply chains and includes for example a sample Code of Conduct, Recruitment and Employment Benchmarks, and Sample Supplier Agreements.

---

### Resource Spotlight

---

[Workers' Rights](#) from the Occupational Safety and Health Administration is a general overview of worker rights under the Occupational Safety and Health Act. The resource includes information on worker protections, employer responsibilities and establishing safety and health programs.

---

### Resource Spotlight

---

The [Monitoring Labor Recruiters Tool](#), which can be found on the Responsible Sourcing Tool site as part of a U.S. Department of State and labor rights NGO initiative, recommends a general approach to monitoring labor-recruiter performance. Risks of human trafficking in supply chains can be controlled by properly designed and implemented processes for the recruitment, selection, and hiring of workers. Whenever possible, companies should recruit, hire, and employ workers directly. When direct recruitment is not possible, companies must exercise careful due diligence in the selection of labor recruiters to minimize the risk of human trafficking as a result of fraudulent or misleading recruitment practices.

---

### Resource Spotlight

---

[Tips for Small Businesses](#), developed by the U.S. Equal Employment Opportunity Commission, provides information and resources to help small businesses develop employee policies to address common workplace issues, including [discrimination](#), [harassment](#), and [reasonable accommodation](#). The Select Task Force on the Study of Harassment in the Workplace, develop a [checklist for employers](#) to develop and/or assess their anti-harassment policies.

---

**6.2 Human trafficking risk assessments** are fundamental elements of due diligence to prevent human trafficking in supply chains for purchased goods or services. They help identify ways in which an organization may be causing or contributing to labor rights abuses and areas in which the organization might be at risk of doing so. Assessments can help identify existing human trafficking in supply chains or risks of where in the supply chain these abuses may occur. This allows organizations to focus prevention efforts on those areas of the supply chain with greatest risks.<sup>163</sup>



## Resource Spotlight

---

The [Supply Chain Mapping and Risk Screening](#) tool, developed through a collaboration between Verité and the U.S. Department of State, provides guidance on assessing risk at the level of country of production and type of production and describes how human trafficking risk might manifest in practice at various worksites in supply chains.<sup>164</sup>

---

**6.3 Policies and programs to address school and community-level risks through environmental approaches** reduce violence. Research indicates that individual and organizational characteristics interact to create environments conducive to violence and that addressing these characteristics and creating healthy climates can reduce these effects.<sup>165</sup>

## Resource Spotlight

---

[Human Trafficking in America's Schools](#), developed by ED, provides awareness of the current prevalence of child trafficking and the forms it takes, information on risk factors and indicators of child trafficking and details about three prevention tiers and the implications for schools' role in addressing child trafficking. The guide also includes information on how professional development of school staff and prevention education for students and families can reduce the likelihood of trafficking and details on how policies, protocols, and partnerships with other community sectors can help prevent trafficking.

---

## Strategy 7: Foster Multidisciplinary Networks and Coalitions

Multidisciplinary coalitions and networks provide an opportunity for heightened collaboration and coordination to solve problems, develop policies and procedures, and implement programs that reach beyond the capacity of any one group.<sup>166</sup> This approach supports greater understanding of human trafficking in a specific community or system and increases efficiency, reducing costs and redundancy. Within certain systems, it can also increase identification and reduce barriers for survivors and individuals at risk who often must navigate multiple systems for support. An effective multidisciplinary system of care is one that, “uses all available resources and facilitates coordination between service providers and partners while being community-based, family-driven (when safe), youth-guided, survivor-informed, and culturally and linguistically competent.”<sup>167</sup> Networks and coalitions should also be representative of the population they are serving, and work to ensure that approaches are responsive to all forms of human trafficking.

### Approaches

**7.1 Shared protocols for preventing and responding to human trafficking** create a unified and consistent set of actions, recommendations, and services. Consensus on regulations and practices, shared standards of care, and expectations for model behavior amplify a simple and far-reaching message on how to prevent and respond to human trafficking.<sup>168</sup>



## Resource Spotlight

---

OTIP's [Human Trafficking School Safety Protocol Toolkit](#) is a step-by-step guide to help schools (1) identify students that may be experiencing trafficking or may have an increased risk for trafficking, (2) ensure educators and other staff comply with mandatory reporting laws, (3) ensure the safety of students, educators, and other staff when reporting human trafficking and other forms of violence, and (4) help students connect to service providers and/or programs intended to reduce further exposure to violence and victimization.

---

**7.2 Federal, statewide, countywide, or locality-wide coordination** enhances a jurisdiction's ability to prevent and respond to human trafficking by gathering individuals and groups to create solutions and leverage resources to increase impact.<sup>169</sup> Human trafficking is complex and permeates multiple levels of society and systems. The prevention response must similarly traverse disciplinary and jurisdictional boundaries and recognize the complex jurisdictional challenges faced by Indigenous communities. At least 26 states and Guam have enacted legislation requiring the creation of a human trafficking task force, work group, study group, or similar coordination effort. In addition, 13 states and the District of Columbia have task forces operated by various state agencies, such as Attorneys' General offices.<sup>170,171</sup>

## Resource Spotlight

---

The [What to Know: Municipal Response to Human Trafficking Fact Sheet](#) reflects learning from the Ten/Ten Municipal Fellowship, which were convenings held by the City of Houston Mayor's Office in collaboration with OTIP through the National Human Trafficking Training and Technical Assistance Center. The fact sheet reflects learning from over 20 different municipalities, including implementing systems-level services, engaging industries impacted by trafficking, raising awareness at scale, and conducting data-informed disaster outreach. The resources and examples provided serve as a guide to help municipalities across the United States take a proactive approach to human trafficking in their communities.

---

## Resource Spotlight

---

The [Enhanced Collaborative Model Task Force to Combat Human Trafficking](#), implemented through OVC, funds initiatives to develop, expand, or strengthen a multidisciplinary approach to fight human trafficking. This collaborative approach must include victim and social service providers, law enforcement and prosecution personnel, survivors, and a range of other governmental and non-governmental partners that work together to provide a diverse set of appropriate services for trafficking victims. The program expects a co-leadership model approach, with shared decision making by both the lead law enforcement and the lead victim service provider applicants.

---

**7.3 Data standardization and interoperability** refers to creating common vocabularies to capture data more consistently, and the ability of two or more systems or components to exchange information and use the information to make better-informed decisions. When administered effectively, to include ensuring confidentiality, interoperability can reduce barriers that limit an accurate understanding of a particular issue or prevent individuals from receiving the best possible care.<sup>172,173</sup>



**7.4 Stakeholder engagement in social compliance systems** allows organizations to gather a variety of perspectives before committing to a particular approach. It can help organizations understand the consequences of certain decisions and actions for specific stakeholders, the varied and changing expectations from stakeholders, and the key issues that surface in the organization's supply chains. Stakeholder engagement also fosters buy-in, because those who participate in the development of a system will be less likely to criticize it later if they see their ideas integrated into the selected approach and programs.<sup>174</sup> Some organizations establish or join multi-stakeholder groups, which facilitate learning from other organizations, leverage varied expertise, and provide a safe space to engage collectively.<sup>175</sup>

## Resource Spotlight

The Joint Forced Labor Working Group of the Healthcare and Public Health Sector Partnership brings together public and private stakeholders from across the health supply chain—including representatives from federal government agencies, industries that procure and supply goods and services in the health supply chain, anti-trafficking professionals, and individuals with lived human trafficking experience—to develop tools and resources to assist the sector with preventing, identifying, and addressing forced labor in their supply chains.<sup>176</sup>

## Resource Spotlight

The [Human Trafficking Data Collection Project](#) examines current data collection practices, data standards, and technologies used for human trafficking data collection for the purposes of understanding human trafficking victimization and service needs. The project has been informed by multiple phases of public engagement to gather requirements for an interoperable data collection platform that could address known challenges in collecting data on human trafficking: inconsistent screening; insufficient service coordination; differences in data standards and formats; and lack of resources to securely collect, analyze, and share data. The project is a partnership between OTIP, CB, and the Office on Women's Health (OWH).

The [Human Trafficking Data Collection Activities Report](#) describes the Bureau of Justice Statistics' activities during 2021 and 2022 to collect data and report on human trafficking. It details ongoing and completed efforts to measure and analyze the nationwide incidence of human trafficking, to describe characteristics of individuals who experience and perpetrate human trafficking, and to describe criminal justice responses to human trafficking offenses. Additionally, it provides information on human trafficking suspects referred to and prosecuted by U.S. attorneys, human trafficking defendants convicted in U.S. district court, and admissions to state prison for human trafficking.

The U.S. Government Accountability Office's Report on [Tribal Epidemiology Centers: HHS Actions Needed to Enhance Data Access](#) encourages improved processes and policies for increasing Tribal Epidemiology Centers access to federal databases, which can help community-based organizations report and prevent human trafficking within Indigenous populations. It also provides strategies for federal agencies to improve the collection, evaluation, and analysis of data.





## Strategy 8: Promote Social Norms That Protect Against Violence (Societal Level)

Changing social norms that accept or cultivate indifference to violence is necessary to prevent multiple forms of violence, including human trafficking.<sup>177</sup> Norms are established at the group level and can be defined as “beliefs and expectations about how members of the group should behave.”<sup>178</sup> Promoting social norms that underscore and reflect the fundamental rights inherent to all people, including that all people are of equal value and all gender identities may experience violence or abuse, can significantly bolster efforts to prevent, identify, and respond to human trafficking. Effective programs provide accurate information and engage individuals in social learning that reduces perpetration of and indifference to violence and promotes health enhancing attitudes and behaviors. Programs that seek to change social norms within the contexts of relationships and communities need to be implemented widely in order to have societal-level impact.

### Approaches

**8.1 Programs to engage bystanders** are one way to create a safe community that promotes social norms that protect against violence and holds perpetrators responsible for their actions.<sup>179,180,181</sup> A bystander approach addresses the behaviors of friends, families, teachers, witnesses, and others who observe any act or pattern of abuse. Programs can also motivate people to promote norms that protect against violence and to intervene safely and effectively when they observe behavior that puts others at risk.<sup>182</sup> Programs within

this approach can include those designed to empower young people to speak up against language or behaviors that promote violence, as well as those focused on social justice education.<sup>183,184</sup> While bystander engagement programs have the potential to impact specific relationships, interventions will need to be implemented widely to move from relational-level impact to societal-level impact.

### Resource Spotlight

---

The National Sexual Violence Resource Center, funded by the CDC, has compiled a list of [bystander intervention resources](#) for advocates, preventionists, and community members working to implement and evaluate bystander approaches to prevent sexual violence.

---

### Resource Spotlight

---

OTIP's [Human Trafficking Community Readiness Guide](#) was created by a diverse group of subject matter experts, including individuals with lived experience, with the intention to strengthen community readiness in anti-trafficking work. The guide provides step-by-step instructions on how communities can assess their current efforts and develop sustainable strategies based on their level of readiness. This guide will help community providers and organizations create an effective, coordinated, multidisciplinary, and tailored approach to identify and respond to trafficking in your unique community.

---

**8.2 Programs to mobilize allies** help address human trafficking victimization and perpetration. Engaging allies in prevention work is important to reducing multiple forms of violence, including domestic and sexual violence, stalking, and gender-based violence. While research within





this approach has predominately focused on engaging men and boys as allies, it is important to engage individuals across the gender spectrum to foster healthy communities that are aware of attitudes, perceptions, and social norms that contribute to labor and sexual exploitation and its underreporting.<sup>185,186</sup> People with lived experience should be included in efforts to engage and mobilize allies to ensure any efforts reflect the needs of the communities being served. Sometimes these programs are implemented at the relational level, but they can have broad societal-level impact if they are implemented widely.

**8.3 Community education, awareness, and outreach** promotes social-environmental awareness of trafficking, promotes cultural humility, reduces implicit bias, and connects people with resources that can improve their safety and enhance their well-being.<sup>187</sup> Effective community education, including media coverage and campaigns, extends beyond the provision of information to “help build a critical mass of support for safer behavior, norms, and policies” that prevent victimization and decrease the shame, (self-)stigma, and victim-blaming that often limit help-seeking behavior by providing responsible, accurate information.<sup>188</sup> When these education and outreach efforts effectively occur across many communities, it is possible to have societal-level impact. It is important that these efforts are not exclusively directed toward individuals who may be at risk for trafficking. Involving a diverse group of survivors of human trafficking in the creation of community education and awareness programs will result in materials that will benefit a broader group of individuals, particularly those who are underserved, and mitigate unintended consequences.<sup>189</sup>

## Resource Spotlight

---

OTIP’s [Look Beneath the Surface \(LBS\)](#) campaign raises public awareness of human trafficking and the factors that make certain communities more at risk. Informed by people with lived experience, federal partners, grantees, and other collaborators, the LBS campaign fosters a deeper understanding of human trafficking through focused outreach and encourages help-seeking behaviors among people who may be at risk for or experiencing human trafficking and the professionals who engage with them.

OVC’s [Faces of Human Trafficking](#) series is intended to be used for outreach and education efforts of service providers, law enforcement, prosecutors, and others in the community. The series includes information about sex and labor trafficking, multidisciplinary approaches to serving victims of human trafficking, effective victim services, victims’ legal needs, and voices of survivors.

---

**8.4 Public reporting on social compliance performance and engagement** is an opportunity for employee education and buy-in, self-assessment, external input, and accountability. It helps educate everyone in the company about the program, which can foster a greater commitment across the company to support social compliance and bolster loyalty among employees who value issues related to worker rights. Additionally, the process of putting together a report requires reexamining key performance indicators and assessing progress against them. Reporting can also offer clear processes through which workers and local community members can provide feedback. Finally, reporting should clearly state the goals of the social compliance program, how the organization is pursuing those goals, how it measures progress, and the degree of progress to date.



## Resource Spotlight

---

[Comply Chain](#) was developed by DOL for companies and industry groups seeking to develop robust social compliance systems for their global production. Comply Chain provides a practical, step-by-step guide on critical elements of social compliance, and is designed for companies that do not have a social compliance system in place or those needing to strengthen their existing systems. Step 8 of the Comply Chain tool provides information and resources on public reporting of social compliance performance and engagement.<sup>190</sup>

---

**8.5 Policies, practices, and program development that promote prevention** by addressing social determinants of health, such as economic conditions, housing, transportation, and education, and other factors that increase an individual or community's risk to human trafficking are a critical component of a long-term, primary prevention strategy. Common barriers to achieving positive social determinants of

health outcomes can be mitigated by training professionals interacting with individuals and communities at-risk or experiencing trafficking to utilize trauma-informed and culturally and linguistically appropriate practices. Further, companies, government agencies, and other collaborators can work together to establish clear processes for individuals who have experienced human trafficking to access benefits to which they are entitled under state and federal laws, like record relief, [credit repair](#), and [separation of their phone line](#) from a mobile service contract shared with their abuser.



# Appendix A: Potential Activities and Outcomes for Framework Strategies

All activities should align with the guiding principles previously outlined and be rigorously evaluated to identify successes and areas needing improvement and to measurably assess their impact.

## Guiding Principles

- Equity and Inclusivity
- Evidence-Based Approaches
- Multidisciplinary Collaboration
- Person-Centered Approaches
- Two-Generation/Whole Family Approaches

## Strategy 1: Strengthen Skills to Promote Self-Efficacy and Prevent Human Trafficking

### Potential Activities

- Evaluate, or fund the evaluation of, skills-based prevention education and/or social emotional learning programs that prevent human trafficking and intersecting forms of violence.
- Fund, develop, and/or implement targeted prevention education to ensure workers (including U.S. citizens, lawful permanent residents, and foreign nationals) are aware of their rights, organizational policies, and contractual obligations against trafficking, how to leave exploitative jobs, and use of available grievance mechanisms.

- Fund, develop, and/or implement targeted prevention education that addresses human trafficking and intersecting forms of violence with children and youth in high-risk settings (e.g., foster care programs, group homes, detention facilities, substance use treatment centers, shelters) or community programs (e.g., places of worship, community centers, ESL programs).
- Fund, develop, and/or implement universal skills-based prevention education and/or social emotional learning programs.
- Integrate universal prevention education into elementary, middle, high school, and college existing comprehensive violence prevention curricula.
- Mandate prevention education in specific settings or programs (e.g., schools, workplace) or with specific populations (e.g., children and youth in the child welfare or juvenile justice systems, unaccompanied children, temporary nonimmigrant worker visa holders, foreign national workers).

### Potential Outcomes

- Improved violence prevention-related knowledge, behaviors, and beliefs
- Increases in help-seeking behavior
- Increases in knowledge about human trafficking and other related forms of violence



- Increases in knowledge about immigration relief available to individuals who have experience trafficking
- Increases in knowledge about workplace rights, anti-trafficking policies, and grievance mechanisms
- Increases in perception of risk
- Increases in relationship satisfaction and well-being
- Increases in self-efficacy
- Increases in the use of healthy relationship skills
- Increases in trust in service providers and other helping professionals
- Reductions in attitudes that accept violence in relationships
- Reductions in barriers to seeking help
- Reductions in high-risk sexual behaviors
- Reductions in perpetration of peer violence, including bullying
- Reductions in substance misuse
- Reductions in victimization and perpetration of human trafficking

## **Strategy 2: Identify and Support People Who Have Experienced or are At-Risk of Experiencing Human Trafficking to Increase Safety and Reduce Harm**

### **Potential Activities**

- Assess level of expertise within provider networks and develop strategies to increase the number of professionals available to provide person-centered, culturally responsive, and linguistically

appropriate services to all individuals within the service population.

- Develop and/or implement policies and procedures that require universal needs assessment and/or screening for children, youth, and adults in high-risk settings (e.g., homeless shelters, child welfare, criminal justice) or circumstances (natural disasters, migration, and/or service transitions or disruptions).
- Develop and/or implement policies and procedures to mitigate risk during natural disasters, migration, and/or service transitions or disruptions.
- Equip or fund professionals to support processing of T and U visas to avoid placing the financial burden on the individual who experienced human trafficking.
- Establish safe reporting and communication channels for individuals impacted by human trafficking to request assistance.
- Establish policies and practices to require follow-up with individuals and families receiving support through publicly funded programs to ensure survivors are aware of their rights and are receiving responsive services.
- Establish restorative justice approaches that focus on rehabilitation, education, and employment and training opportunities for youth who become involved with the justice system.
- Evaluate, or fund the evaluation of, trainings for professionals and/or community leaders.
- Evaluate, or fund the evaluation of, programs designed to prevent or reduce the impact of human trafficking and related forms of violence.



- Fund, develop, and/or implement culturally responsive services for communities that are underserved.
- Fund, develop, and/or implement peer-to-peer support and/or mentorship programs for individuals who have experienced human trafficking.
- Fund, develop, and/or implement services for individuals who have experienced human trafficking or related forms of violence.
- Fund, develop, and/or implement specialized human trafficking training with professionals who work directly with individuals who may be at risk or experiencing human trafficking.
- Fund, develop, and/or implement specialized trainings for all professionals who implement needs assessments and/or screening tools with individuals who may be at risk or experiencing human trafficking.
- Fund, develop, and/or implement training on co-occurring issues (e.g., human trafficking, substance use, mental health, trauma).
- Fund, develop, and/or implement treatment programs designed to disrupt developmental pathways toward violence.
- Fund research to gather more data about the prevalence of human trafficking amongst youth and young adults experiencing homelessness.
- Incorporate mental health and crisis response training for all staff working with individuals who may be at risk or experiencing human trafficking.
- Research the impact of generational trauma and its effects on human trafficking.

## Potential Outcomes

- Decreases in stigma associated with mental health disorders
- Improvements in academic performance
- Improvements in access to services for individuals impacted by human trafficking
- Improvements in family cohesion and adaptability
- Improvements in parental limit setting, parent-child communication, and youth's prosocial behavior
- Improvements in peer relations, including aggression
- Increases in access to services and help-seeking
- Increases in physical safety
- Increases in self-efficacy
- Reductions in abuse and neglect perpetration
- Reductions in parental stress and depression and improvements in parenting outcomes for parents of youth with behavioral problems
- Reductions in problematic sexual behavior reoffending
- Reductions in risk for later human trafficking perpetration among victimized youth
- Reductions in short- and long-term negative effects of human trafficking victimization
- Reductions in short- and long-term trauma-related symptoms, including internalizing (e.g., posttraumatic stress, depression, anxiety) and externalizing (e.g., sexualized behaviors, aggressive behavior) symptoms
- Reductions in subsequent experiences of human trafficking
- Reductions in substance use





## Strategy 3: Strengthen Economic Supports

### Potential Activities

- Build partnerships with social programs to support individuals who are pregnant or parenting young children.
- Develop, implement, and/or fund life skill programs such as financial literacy, cooking, nutrition, wellness, and parenting for individuals and families in transition from system involvement (e.g., child welfare, juvenile justice, criminal justice).
- Develop, implement, and/or fund long-term restorative services to disrupt cycles of trauma by equipping those victimized by labor or sex trafficking to enter the marketplace with viable professional skills and healthy coping strategies.
- Develop, implement, and/or fund peer mentorship programs for individuals and families in transition from system involvement (e.g., child welfare, juvenile justice, criminal justice).
- Develop long-term housing program for individuals who have experienced human trafficking.
- Develop pathways to ensure eligible applicants, including youth and young adults, can access benefits and services designed to enhance economic stability.
- Develop short-term housing solutions, including rapid rehousing programs and other alternatives to shelters.
- Fund economic development opportunities for individuals who experience or are otherwise vulnerable to human trafficking.
- Fund emergency medical care for individuals who have experienced trafficking

to reduce medical system financial burden and prevent re-victimization.

- Fund service providers that invest in survivors' development through funding educational scholarships, including postgraduate studies, business internships, job placement, mental health services, and addiction treatment and recovery programs.
- Incorporate and enforce an "employer pays" requirement in all Supplier Codes of Conduct, service agreements, contracts, and purchase agreements with all suppliers and subcontractors to clearly communicate to labor recruiters that job seekers cannot be charged recruitment fees and that the employer must pay for recruitment.<sup>191</sup>
- Invest in and create opportunities for skills development and professional growth for individuals with lived experience.
- Provide remedies (e.g., disposition of arrest records, vacatur) for survivors with inappropriate arrests and criminal records.
- Train employers to design trauma-informed workplace environments for individuals who have experienced human trafficking.
- Strengthen existing youth homelessness shelter and housing programs, such as those funded by the Runaway and Homeless Youth Act, to identify, protect, and respond to the unique needs of survivors of human trafficking and prevent the trafficking of youth in their program more effectively.
- Develop and implement parenting support for survivors of trafficking with children.

### Potential Outcomes

- Decreases in shame/stigma associated with mental health and substance use disorders



- Improvements in health and well-being
- Increases in access to supportive services
- Increases in annual family income
- Increases in economic stability
- Increases in employment stability
- Increases in equitable education opportunities
- Increases in gender equality and economic and occupational status for marginalized groups
- Increases in housing stability
- Increases in knowledge of and skills for healthy relationships, education and employment, and civic engagement
- Increases in knowledge of gender norms and health
- Increases in relationship satisfaction
- Reductions in adolescent risky health behaviors
- Reductions in child abuse and neglect
- Reductions in human trafficking
- Reductions in intimate partner violence
- Reductions in maternal depression and parental stress
- Reductions in poverty, financial stress, and economic dependency
- Reductions in relationship conflict
- Reductions in substance misuse and mental illness

## Strategy 4: Promote Family Environments That Support Healthy Development

### Potential Activities

- Develop, implement, and/or fund family preservation and/or reintegration programs.

- Develop, implement, and/or fund family-based interventions to repair relationships between youth in crisis and their parents and/or other relatives (when safe and desired by all youth).
- Develop, implement, and/or fund fatherhood and family strengthening programs in communities with high susceptibility to human trafficking.
- Educate families on healthy brain development and the impact of trauma.
- Educate families on how to support individuals who have experienced human trafficking and reduced the stigma and shame associated with human trafficking.
- Implement and/or fund maternal, infant, and early childhood home visiting programs in communities with high susceptibility to human trafficking.

### Potential Outcomes

- Higher educational attainment
- Higher rates of full-time employment
- Higher socioeconomic status and economic self-sufficiency
- Improved parent-child engagement and interaction
- Improved social competency, pro-social behavior, and interaction with peers
- Increases in child health and development
- Increases in family cohesion and community support
- Increases in parental/caregiver efficacy in resolving teen relationship conflicts and engaging in rule setting
- Increases in seeking help for parenting
- Reduction in beliefs that getting help for parenting is bad
- Reductions in child abuse and neglect



- Reductions in child welfare encounters
- Reductions in harsh and ineffective discipline
- Reductions in rates of aggressive and social behavior problems in children and youth
- Reductions in rates of crime, arrest, and incarceration
- Reductions in rates of depressive symptoms
- Reductions in rates of out of home placement of children and youth
- Reductions in rates of substance misuse
- Improved violence prevention-related knowledge, behaviors, and beliefs

## Strategy 5: Promote Social Connectedness

### Potential Activities

- Adopt and implement due diligence policies and practices that protect workers' freedom of association and personal freedom.
- Build partnerships with mentoring and peer-to-peer support programs to enhance access to prosocial peers and adults.
- Develop and/or implement programs and activities to enhance social integration for new arrivals to the United States.
- Develop and promote inclusive opportunities for family involvement in school programs.
- Fund, develop, and/or implement mentorship programs in community settings (e.g., places of worship, community centers, cultural arts centers).

- Fund, develop, and/or implement programs to preserve crucial cultural traditions and practices.
- Identify, develop, and/or implement strategies to engage students, particularly those with increased risk factors, in school activities.

### Potential Outcomes

- Increases in healing from intergenerational and historical trauma
- Increases in help seeking behavior
- Increases in indicators of community connectedness
- Reduction of human trafficking risk in supply chains
- Reductions in rates of depressive symptoms
- Reductions in rates of substance misuse

## Strategy 6: Create Protective Environments

### Potential Activities

- Adopt, implement, and enforce strong social compliance policies, including codes of conduct, that apply organizationally and to suppliers of goods and services in the organization's supply chains.
- Designate a senior accountability official to ensure effective implementation of anti-trafficking acquisition rules and best practices.
- Develop, implement, and/or fund community violence prevention programs.
- Develop, implement, and/or fund school policies and programs designed to enhance safety and well-being.



- Develop or update, validate, and implement screening forms and protocols and supply chain mapping and risk assessments.
- Partner with hospitals, schools, businesses, or community-based programs to incorporate human trafficking into existing violence prevention programs.
- Provide training and technical assistance for professionals working with populations or supply chains at high risk for human trafficking (e.g., school-based staff, employers/managers, community leaders).
- Identify, develop, and implement strategies to ensure that responses protect rather than punish youth who are trying to stay safe and meet basic needs.
- Identify, develop, and implement strategies to engage students, particularly those with increased risk factors, in school activities. For high school students with increased risk factors, implement education supports to help them graduate high school despite instability at home.
- Reduction of human trafficking risk in supply chains
- Reductions in human trafficking and related forms of violence
- Reductions in perceived tolerance of human trafficking and related forms of violence in communities
- Reductions in rates of human trafficking and related forms of violence at the community level
- Reductions in bullying and other youth violence

## Strategy 7: Foster Multidisciplinary Networks and Coalitions

### Potential Activities

- Conduct a community mapping and needs assessment to assess service availability and gaps.
- Engage people and groups affected by or with an interest in the organization's policies, actions, and/or supply chain in the development and implementation of the social compliance program.
- Establish a multidisciplinary statewide response to human trafficking that is supported by relevant policies and procedures and best available evidence.
- Fund the development and implementation of equitable human trafficking surveillance systems at the state, tribal, territorial, and/or local level.
- Identify existing data sources and assess opportunities for coordination and/or collaboration.

### Potential Outcomes

- Increases in indicators of community connectedness
- Increases in neighborhood collective efficacy
- Increases in social support provided to individuals affected by human trafficking and related forms of violence
- Increases in disclosure and reporting of human trafficking and related forms of violence
- Increases in feelings of safety in one's school, workplace, or neighborhood
- Increases in development of organizational policies and resource-seeking



## Potential Outcomes

- Identification of trends and stronger understanding of syndemics involving labor and sex trafficking victimization
- Increase in efficiencies and access to supportive services for individuals who have experienced human trafficking
- Reduction in barriers to accessing services for individuals who have experienced human trafficking
- Reduction in risk of human trafficking in supply chains

## Strategy 8: Promote Social Norms That Protect Against Violence

### Potential Activities

- Develop, implement, and/or fund bystander programs to strengthen individual skills and knowledge to take positive or “pro-social” action in relation to attitudes and behaviors supporting violence and precursors to violence.
- Develop, implement, and/or fund programs that engage allies, model positive masculinity, normalize help seeking behavior, and promote social and peer-group norms that encourage non-violent behavior and peer support.
- Develop, implement, and/or fund public awareness and outreach activities that promote protective social norms and behaviors that contribute to safety and well-being, including gender and racial equity.
- Partner with foreign embassies and consular offices to provide public awareness and outreach programs to individuals traveling to the United States.

- Publicly report social compliance performance and engagement on a regular basis.
- Develop and provide trauma-informed and culturally and linguistically appropriate human trafficking training and technical assistance for law enforcement.
- Develop policy guidance and clear processes for implementing laws and regulations that establish benefits for individuals who have experienced human trafficking.

### Potential Outcomes

- Increase in belief that men and boys can experience sexual violence
- Increase in buy-in to social compliance to labor laws and supply chain protocols
- Increase in bystander behavior to prevent violence
- Increase in favorable attitudes towards women and girls
- Increase in favorable beliefs towards safe communities
- Increase in trust in law enforcement by individuals who have experienced trafficking
- Reduction in acceptability of violence
- Reduction of human trafficking risk in supply chains
- Reduction in peer support for participating in violence
- Reduction in perpetration of human trafficking and related forms of violence
- Reduction of barriers to accessing available benefits





# Appendix B: How This Framework Was Created

In April 2019, OTIP released [Definitions and Principles of Human Trafficking Prevention](#), an information memorandum based on the best available evidence that informs the principles of violence prevention established by the CDC's DVP. This information memorandum defines violence and its connection to human trafficking, defines severe forms of human trafficking, and describes the three levels of prevention, the four levels of the social-ecological model, and the social determinants of health. The concepts described in the information memorandum informed the early development of the Prevention Framework.

While developing the Prevention Framework, HHS engaged with diverse collaborators, gathered information through a public [Request for Information](#) (RFI), and reviewed empirical research and publications on effective prevention practices, including publicly available state plans with documented prevention efforts. Through this collection of information, HHS identified existing practices that are well positioned for further development, evaluation, and replication, as well as opportunities to address gaps in programming and research.

## Collaborators

HHS gathered input from the following diverse collaborators, prioritizing publications and conversations with individuals with

lived experience as well as those from underrepresented communities:

- Individuals with lived experience, including representatives from the U.S. Advisory Council on Human Trafficking, the National Survivor Network, the Survivor Alliance, and the Human Trafficking Leadership Academy
- HHS grant recipients and regional program partners
- Federal partners, including the Departments of Education, Homeland Security, Justice, Labor, and State and the Equal Employment Opportunity Commission.
- Native community leaders in several U.S. states and territories, including Arizona, California, Hawaii, South Dakota, Washington, Guam, and Saipan
- HHS advisory groups, including the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States, the National Advisory Council on Migrant Health, the Secretary's Tribal Advisory Committee, and the ACF Tribal Advisory Committee
- National associations, including the National Governors Association, the American Hospital Association, the National Council of Juvenile and Family Court Judges, and the National Conference of State Legislatures



## Request for Information

HHS's RFI called for diverse perspectives on how to strengthen efforts in the United States to prevent human trafficking at the primary, secondary, and tertiary levels. In response to the RFI, HHS received information on more than 200 programs and activities designed to prevent sex and labor trafficking of children and adults, including underserved populations. HHS also received a series of submissions with detailed recommendations to improve human trafficking prevention efforts.

## Empirical Research and Publications

Efforts to develop, test, and scale prevention strategies within the field of human trafficking are relatively new, and rigorous evaluation of the effectiveness of human trafficking prevention programs is currently limited.<sup>192,193,194</sup> To inform the strategies and approaches outlined in the plan, HHS looked to empirical literature from other more established sectors of violence prevention (e.g., intimate partner violence, sexual violence, and youth violence). The rationale for this approach is that all forms of violence are interconnected and often stem from similar causal factors, and that crosscutting intervention strategies should be tested and evaluated for effectiveness across multiple forms of violence.<sup>195,196</sup>

The following sources were fundamental in the development of the Prevention Framework and informed the selection of strategies and approaches:

- [Best Practices and Recommendations for States](#) (National Advisory Committee on the Sex Trafficking of Children and Youth in the United States)
- [Collective Impact Forum](#)
- [Comply Chain \(DOL\)](#)

- [Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence \(CDC\)](#)
- [Human Trafficking Is a Public Health Issue: A Paradigm Expansion in the United States](#)
- [National Compendium Resource Library](#)
- [Responsible Sourcing Tool \(Verité and U.S. Department of State\)](#)
- [Spectrum of Prevention \(The Prevention Institute\)](#)
- [Resources for Violence Prevention \(CDC\)](#)
- U.S. Advisory Council on Human Trafficking [Annual Reports for 2016, 2017, 2019, 2020, 2021, 2022](#)

## Peer Review

HHS, through its National Human Trafficking Training and Technical Assistance Center, contracted with several experts with lived experience in human trafficking to provide input on the Prevention Framework prior to its publication for public comment. Staff from multiple federal agencies, including the Departments of Defense, Education, Health and Human Services, Homeland Security, Justice, Labor, and State and the Equal Employment Opportunity Commission also reviewed and provided feedback.

## Public Comment

The draft Prevention Framework was published for public comment on the Office on Trafficking in Persons' (OTIP) [website](#) from May 26, 2023 – June 1, 2023, and in the [Federal Register](#) from June 1, 2023, to June 9, 2023. During the public comment period, OTIP staff also hosted office hours with individuals and organizations interested in commenting on the Prevention Framework. HHS thoroughly reviewed all public comments received and incorporated suggested feedback as appropriate.



## National Human Trafficking Prevention Summit

The HHS Task Force to Prevent Human Trafficking hosted the first-ever [National Human Trafficking Prevention Summit](#) on August 3-4, 2023. Approximately 500 in-person and 4,000 virtual participants attended, including leaders across federal, state, tribal, local, and territorial governments; business, industry, and other private sector entities; nonprofits and NGOs; and philanthropic, advocacy, faith based, and research organizations. Approximately 20% of in-person attendees were known to have lived experience in human trafficking.

Through four plenary sessions and 25 workshops, participants shared knowledge and ideas on anti-trafficking prevention and early intervention strategies, discussed emerging trends, research, and best practices, and explored opportunities to enhance cross-sector collaboration to advance prevention. The learnings from the Summit have informed the strategies and approaches outlined in this Framework.



# Appendix C: Endnotes

- 1 22 U.S. Code § 7102 (2000)
- 2 International Labor Organization. (2022). Global estimates of modern slavery. [https://www.ilo.org/wcmsp5/groups/public/---ed\\_norm/---ipec/documents/publication/wcms\\_854733.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_norm/---ipec/documents/publication/wcms_854733.pdf)
- 3 Ibid
- 4 Chon, K., & Khorana, S. (2017). Moving forward: Next steps in preventing and disrupting human trafficking. In M. Chisolm-Straker & H. Stoklosa (Eds.) *Human trafficking is a public health issue*. (pp. 415–441). [https://link.springer.com/chapter/10.1007/978-3-319-47824-1\\_24](https://link.springer.com/chapter/10.1007/978-3-319-47824-1_24)
- 5 Office to Monitor and Combat Trafficking in Persons. *Key Topics – Office to Monitor and Combat Trafficking in Persons*. <https://www.state.gov/key-topics-office-to-monitor-and-combat-trafficking-in-persons/>
- 6 Institute of Medicine and National Research Council. (2013). *Confronting commercial sexual exploitation and sex trafficking of minors in the United States*. The National Academies Press. 10.17226/18798
- 7 22 U.S. Code § 7102 (2000)
- 8 Centers for Disease Control and Prevention. (2022). *The Public Health Approach to Violence Prevention*. <https://www.cdc.gov/violenceprevention/about/publichealthapproach.html>
- 9 Ibid
- 10 Alpert, E., & Chin, S. (2017). Human trafficking: Perspectives on prevention. In M. Chisolm-Straker & H. Stoklosa (Eds.) *Human trafficking is a public health issue*. (pp. 379–400). [https://link.springer.com/chapter/10.1007/978-3-319-47824-1\\_22](https://link.springer.com/chapter/10.1007/978-3-319-47824-1_22)
- 11 Institute of Medicine and National Research Council. (2013). *Confronting commercial sexual exploitation and sex trafficking of minors in the United States*. The National Academies Press. 10.17226/18798
- 12 Rothman, E. F., Farrell, A., Paruk, J., Bright, K., Bair-Merritt, M., & Preis, S. R. (2021). Evaluation of a Multi-Session Group Designed to Prevent Commercial Sexual Exploitation of Minors: The “My Life My Choice” Curriculum. *Journal of Interpersonal Violence*, 36(19–20), 9143–9166. <https://doi.org/10.1177/0886260519865972>
- 13 Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Centers for Disease Control and Prevention and the Prevention Institute. [https://www.cdc.gov/violenceprevention/pdf/connecting\\_the\\_dots-a.pdf](https://www.cdc.gov/violenceprevention/pdf/connecting_the_dots-a.pdf)
- 14 Decker, M. R., Wilcox, H. C., Holliday, C. N., & Webster, D. W. (2018). An integrated public health approach to interpersonal violence and suicide prevention and response. *Public Health Reports*, 133(1\_suppl), 65S–79S. <https://doi.org/10.1177/0033354918800019>
- 15 Centers for Disease Control and Prevention. (2022). *Principles of Prevention Guide*. [https://vetoviolence.cdc.gov/apps/pop/assets/pdfs/pop\\_notebook.pdf](https://vetoviolence.cdc.gov/apps/pop/assets/pdfs/pop_notebook.pdf)
- 16 Ibid
- 17 Centers for Disease Control and Prevention. (2022). *The Socio-Ecological Model: A Framework for Prevention*. <https://www.cdc.gov/violenceprevention/about/social-ecologicalmodel.html>
- 18 Kerr, P. (2014). Push and Pull: The Intersections of Poverty, Health Disparities, and Human Trafficking. *Cancer InCytes Magazine*, 3.2. <https://www.cancerincytes.org/push-and-pull-the-intersections-of-pove>
- 19 Kickbusch, I., Allen, L., & Franz, C. (2016). The commercial determinants of health. *The Lancet: Global Health*, Vol. 4, Issue 12, E895–E896. [https://doi.org/10.1016/S2214-109X\(16\)30217-0](https://doi.org/10.1016/S2214-109X(16)30217-0)
- 20 Peate I. Political determinants of health. *Br J Nurs*. 2022 Dec 15;31(22):1133. doi: [10.12968/bjon.2022.31.22.1133](https://doi.org/10.12968/bjon.2022.31.22.1133). PMID: 36519472



- 21 Pan American Health Organization. *Environmental Determinants of Health*. <https://www.paho.org/en/topics/environmental-determinants-health>
- 22 Office of the Assistant Secretary for Health. (2023). *Social Determinates of Health*. <https://health.gov/healthypeople/priority-areas/social-determinants-health>
- 23 22 U.S. Code § 7104(g) (2013)
- 24 Collective Impact Forum. (2014). *What is collective impact?* <https://www.collectiveimpactforum.org/what-collective-impact>
- 25 U.S. Advisory Council on Human Trafficking. (2019). *Annual report 2019*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2019/>
- 26 National Advisory Committee on the Sex Trafficking of Children and Youth in the United States. (2020). *Best Practices and Recommendations for States*. <https://www.acf.hhs.gov/otip/resource/national-advisory-committee-report-best-practices-recommendations>
- 27 U.S. Advisory Council on Human Trafficking. (2019). *Annual report 2019*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2019/>
- 28 Ibid
- 29 U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (2021). *Methods and Emerging Strategies to Engage People with Lived Experience*. <https://aspe.hhs.gov/sites/default/files/documents/47f62cae96710d1fa13b0f590f2d1b03/lived-experience-brief.pdf>
- 30 Ibid
- 31 U.S. Advisory Council on Human Trafficking. (2019). *Annual Report 2019*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2019/>
- 32 U.S. Advisory Council on Human Trafficking. (2021). *Annual Report 2021*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2021/>
- 33 U.S. Advisory Council on Human Trafficking. (2022). *Annual Report 2022*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2022/>
- 34 Thambinathan, V., & Kinsella, E. A. (2021). Decolonizing Methodologies in Qualitative Research: Creating Spaces for Transformative Praxis. *International Journal of Qualitative Methods*, 20. <https://doi.org/10.1177/16094069211014766>
- 35 The Office for Victims of Crime Training and Technical Assistance Center. (2019). *Human trafficking task force e-guide*. <https://www.ovcttac.gov/taskforceguide/eguide/>
- 36 U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (2020). *Trauma-informed approaches: Connecting research, policy, and practice to build resilience in children and families*. <https://aspe.hhs.gov/pdf-report/trauma-informed-approaches-connecting-research-policy-and-practice-build-resilience-children-and-families>
- 37 Substance Abuse and Mental Health Services Administration. (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach* (Report No. (SMA) 14-4884). [https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA\\_Trauma.pdf](https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA_Trauma.pdf)
- 38 Kennedy, A. & Prock, K. (2016). "I still feel like I am not normal": A review of the role of stigma and stigmatization among female survivors of child sexual abuse, sexual assault, and intimate partner violence. *Trauma, Violence, & Abuse*, 19(5), 512–527. <https://doi.org/10.1177/1524838016673601>
- 39 Sotero, M. M. (2006). A conceptual model of historical trauma: Implications for public health practice and research. *Journal of Health Disparities Research and Practice*, 1(1), 93–108. [http://www.ressources-actuarielles.net/ext/isfa/1226.nsf/9c8e3fd4d8874d60c1257052003eced6/bbd469e12b2d9eb2c12576000032b289/\\$FILE/Sotero\\_2006.pdf](http://www.ressources-actuarielles.net/ext/isfa/1226.nsf/9c8e3fd4d8874d60c1257052003eced6/bbd469e12b2d9eb2c12576000032b289/$FILE/Sotero_2006.pdf)





- 40 Ehlers, C. L., Gizer, I. R., Gilder, D. A., Ellingson, J. M., & Yehuda, R. (2013). Measuring historical trauma in an American Indian community sample: Contributions of substance dependence, affective disorder, conduct disorder and PTSD. *Drug and Alcohol Dependence*, 133(1), 180–187. <https://doi.org/10.1016/j.drugalcdep.2013.05.011>
- 41 Conching, A. K. S., & Thayer, Z. (2019). Biological pathways for historical trauma to affect health: A conceptual model focusing on epigenetic modifications. *Social science & medicine* (1982), 230, 74–82. <https://doi.org/10.1016/j.socscimed.2019.04.001>
- 42 Administration for Children and Families. *What is historical trauma?* <https://www.acf.hhs.gov/trauma-toolkit/trauma-concept>
- 43 National Human Trafficking Training and Technical Assistance Center. (2020). *SOAR Online*. <https://www.acf.hhs.gov/otip/training/soar-to-health-and-wellness-training/soar-online>
- 44 Stevens, J. (April 2015). *Adding layers to the ACEs pyramid — What do you think?* ACEs Connection. <https://www.acesconnection.com/blog/adding-layers-to-the-aces-pyramid-what-do-you-think>
- 45 U.S. Department of Health and Human Services, Office of Population Affairs. *Cultural competence*. <https://www.hhs.gov/ash/oah/resources-and-training/tpp-and-paf-resources/cultural-competence/index.html>
- 46 U.S. Department of Health and Human Services. *National Culturally and Linguistically Appropriate Service Standards*. <https://thinkculturalhealth.hhs.gov/clas/standards>
- 47 Sabol, T. J., Chor, E., Sommer, T. E. Chase-Lansdale, P. L., Morris, A. S., Brooks-Gunn, J., Yoshikawa, H., King, C. T., & Guminski, S. (2019). *What are the effects of a two-generation human capital program on children's outcomes in Head Start?* The Aspen Institute. <https://www.researchconnections.org/childcare/resources/37469>
- 48 National Human Trafficking Training and Technical Assistance Center. (2018). *Service recommendations for human trafficking survivors with substance use disorders*. <https://nhttac.acf.hhs.gov/resources/report-htla-class-2-recommendations-services-survivors-substance-use-disorders>
- 49 The Aspen Institute. *What is 2Gen?* <https://ascend.aspeninstitute.org/two-generation/what-is-2gen/>
- 50 Ibid
- 51 National Human Trafficking Training and Technical Assistance Center. (2019). *Human Trafficking Leadership Academy class 3 recommendations*. <https://nhttac.acf.hhs.gov/resources/report-htla-class-3-recommendations-2-generation-whole-family-services-prevent-child>
- 52 Centers for Disease Control and Prevention. Resources for Action. <https://www.cdc.gov/violenceprevention/communicationresources/pub/resource-for-action.html>
- 53 Centers for Disease Control and Prevention. *Violence prevention in practice: Strategies & approaches*. <https://vetoviolence.cdc.gov/apps/violence-prevention-practice/strategy-approaches#!/>
- 54 Williamson, E., O'Brian, J., Jones, L., Mitchell, K., & Dunford, L. (2019). Featured counter-trafficking program: Love146. *Child Abuse & Neglect*, 100. <https://doi.org/10.1016/j.chiabu.2019.104131>
- 55 Gibbs, D., Aboul-Hosn, S., & Kluckman, M. (2019). Child labor trafficking within the US: A first look at allegations investigated by Florida's Child Welfare Agency. *Journal of Human Trafficking*, 6(4), 435–449. <https://doi.org/10.1080/23322705.2019.1594551>
- 56 Institute of Medicine and National Research Council. (2013). *Confronting commercial sexual exploitation and sex trafficking of minors in the United States*. The National Academies Press. 10.17226/18798
- 57 Centers for Disease Control and Prevention. (2016). *Preventing multiple forms of violence: A strategic vision for connecting the dots*. [https://www.cdc.gov/violenceprevention/pdf/Strategic\\_Vision.pdf](https://www.cdc.gov/violenceprevention/pdf/Strategic_Vision.pdf)
- 58 Finkelhor, D., Shattuck, A., Turner, H., Ormrod, R. & Hamby, S. (2011). Polyvictimization in developmental context. *Journal of Child & Adolescent Trauma*, 4(4), 291–300. [http://unh.edu/ccrc/pdf/Polyvictimization\\_in\\_Dev\\_Context.pdf](http://unh.edu/ccrc/pdf/Polyvictimization_in_Dev_Context.pdf)



- 59 Decker, M. R., Wilcox, H. C., Holliday, C. N., & Webster, D. W. (2018). An integrated public health approach to interpersonal violence and suicide prevention and response. *Public Health Reports*, 133(1\_suppl), 65S–79S. <https://doi.org/10.1177/0033354918800019>
- 60 Centers for Disease Control and Prevention. (2016). *Preventing multiple forms of violence: A strategic vision for connecting the dots*. [https://www.cdc.gov/violenceprevention/pdf/Strategic\\_Vision.pdf](https://www.cdc.gov/violenceprevention/pdf/Strategic_Vision.pdf)
- 61 Decker, M. R., Wilcox, H. C., Holliday, C. N., & Webster, D. W. (2018). An integrated public health approach to interpersonal violence and suicide prevention and response. *Public Health Reports*, 133(1\_suppl), 65S–79S. <https://doi.org/10.1177/0033354918800019>
- 62 Centers for Disease Control and Prevention. *The social-ecological model: A framework for prevention*. <https://www.cdc.gov/violenceprevention/publichealthissue/social-ecologicalmodel.html>
- 63 Davis, R., Fujie Parks, L., Cohen, L. (2006). *Sexual violence and the spectrum of prevention: Towards a community solution*. National Sexual Violence Resource Center. [https://www.nsvrc.org/sites/default/files/2012-04/Publications\\_NSVRC\\_Booklets\\_Sexual-Violence-and-the-Spectrum-of-Prevention\\_Towards-a-Community-Solution\\_0.pdf](https://www.nsvrc.org/sites/default/files/2012-04/Publications_NSVRC_Booklets_Sexual-Violence-and-the-Spectrum-of-Prevention_Towards-a-Community-Solution_0.pdf)
- 64 U.S. Department of Health and Human Services, Office on Trafficking in Persons. (2019). *Information memorandum: Definitions and principles to inform human trafficking prevention* (Report No. OTIP-IM-19-01.01). <https://www.acf.hhs.gov/otip/policy-guidance/definitions-and-principles-human-trafficking-prevention-information-memorandum>
- 65 U.S. Department of Labor. (2017). *Comply Chain: Business Tools for Labor Compliance in Global Supply Chains*. <https://www.dol.gov/general/apps/ilab-comply-chain>
- 66 Fortson, B. L., Klevens, J., Merrick, M. T., Gilbert, L. K., & Alexander, S. P. (2016). *Child Abuse and Neglect Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Resource_508.pdf)
- 67 Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). *Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource_508.pdf)
- 68 Walensky, R.P., Jones, C.M., Qualters, J.R. (2022). *Suicide Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. <https://www.cdc.gov/suicide/pdf/preventionresource.pdf>
- 69 Cohen, L. & Swift, Susan. (1999). The spectrum of prevention: Developing comprehensive approach to injury prevention. *Injury Prevention*, 5, 203–207. <https://www.preventioninstitute.org/sites/default/files/uploads/The%20Spectrum%20of%20Prevention-%20Developing%20a%20Comprehensive%20Approach%20to%20Injury%20Prevention.pdf>
- 70 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)



- 71 David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N. & Hall, J. E. (2016). *Youth Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource_508.pdf)
- 72 Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Centers for Disease Control and Prevention and the Prevention Institute. [https://www.cdc.gov/violenceprevention/pdf/connecting\\_the\\_dots-a.pdf](https://www.cdc.gov/violenceprevention/pdf/connecting_the_dots-a.pdf)
- 73 Davis, R., Fujie Parks, L., Cohen, L. (2006). *Sexual violence and the spectrum of prevention: Towards a community solution*. National Sexual Violence Resource Center. [https://www.nsvrc.org/sites/default/files/2012-04/Publications\\_NSVRC\\_Booklets\\_Sexual-Violence-and-the-Spectrum-of-Prevention\\_Towards-a-Community-Solution\\_0.pdf](https://www.nsvrc.org/sites/default/files/2012-04/Publications_NSVRC_Booklets_Sexual-Violence-and-the-Spectrum-of-Prevention_Towards-a-Community-Solution_0.pdf)
- 74 National Advisory Committee on the Sex Trafficking of Children and Youth in the United States. (2019). Preliminary recommendations to strengthen the nation's response to the sex trafficking of children and youth in the united states. [www.acf.hhs.gov/sites/default/files/documents/otip/preliminary\\_recommendations\\_to\\_strengthen\\_the\\_nations\\_response\\_to.pdf](http://www.acf.hhs.gov/sites/default/files/documents/otip/preliminary_recommendations_to_strengthen_the_nations_response_to.pdf)
- 75 National Human Trafficking Training and Technical Assistance Center. (2019). *Human Trafficking Leadership Academy class 3 recommendations*. <https://nhttac.acf.hhs.gov/resources/report-htta-class-3-recommendations-2-generation-whole-family-services-prevent-child>
- 76 Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003). What works in prevention: Principles of effective prevention programs. *American Psychologist*, 58(6-7), 449–456. <https://doi.org/10.1037/0003-066X.58.6-7.449>
- 77 Jones, L. (2014). Improving efforts to prevent children's exposure to violence: A handbook to support the evaluation of child maltreatment prevention programmes. World Health Organization. <https://apps.who.int/iris/rest/bitstreams/646146/retrieve>
- 78 National Advisory Committee on the Sex Trafficking of Children and Youth in the United States. (2020). Best Practices and Recommendations for States. <https://www.acf.hhs.gov/otip/resource/national-advisory-committee-report-best-practices-recommendations>
- 79 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)
- 80 Culture of Respect. (2018). *Enhanced Access, Acknowledge, Act (EAAA) Sexual Assault Resistance*. <https://cultureofrespect.org/program/enhanced-assess-acknowledge-act-eaaa-sexual-assault-resistance/>
- 81 National Human Trafficking Training and Technical Assistance Center. (2019). *Human Trafficking Leadership Academy class 3 recommendations*. <https://nhttac.acf.hhs.gov/resources/report-htta-class-3-recommendations-2-generation-whole-family-services-prevent-child>
- 82 Connecticut Department of Children and Families & ICF Incorporated. (2019). *Connecticut Department of Children and Families: Human Anti-trafficking Response Team (HART) in Connecticut*. [https://portal.ct.gov/-/media/DCF/HumanTrafficking/pdf/90CA1828-01-00-DCF\\_HART\\_Final-Report-January-2020.pdf?la=en](https://portal.ct.gov/-/media/DCF/HumanTrafficking/pdf/90CA1828-01-00-DCF_HART_Final-Report-January-2020.pdf?la=en)
- 83 Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). *Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource_508.pdf)



- 84 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)
- 85 Ibid
- 86 Schott Foundation. *Restorative Practices: Fostering Healthy Relationships & Promoting Positive Discipline in Schools: A Guide for Educators*. [https://schottfoundation.org/restorative-practices/?sm\\_au=iVDRHvs5D6VFqpr](https://schottfoundation.org/restorative-practices/?sm_au=iVDRHvs5D6VFqpr)
- 87 Greenbaum, J. (2017). Introduction to Human Trafficking: Who Is Affected? In M. Chisolm-Straker & H. Stoklosa (Eds.) *Human trafficking is a public health issue*. (pp. 415–441). [https://link.springer.com/chapter/10.1007/978-3-319-47824-1\\_1](https://link.springer.com/chapter/10.1007/978-3-319-47824-1_1)
- 88 Diaz, A., Arden, M., Blaustein, S., Nucci-Sack, A., Sanders, L., & Steever, J. (2021). Using School-Based Health Programs to Prevent Human Trafficking: The Mount Sinai Experience. *Annals of global health*, 87(1), 47. <https://doi.org/10.5334/aogh.3049>
- 89 Alpert, E., & Chin, S. (2017). Human trafficking: Perspectives on prevention. In M. Chisolm-Straker & H. Stoklosa (Eds.) *Human trafficking is a public health issue*. (pp. 379–400). [https://link.springer.com/chapter/10.1007/978-3-319-47824-1\\_22](https://link.springer.com/chapter/10.1007/978-3-319-47824-1_22)
- 90 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)
- 91 Fortson, B. L., Kleven, J., Merrick, M. T., Gilbert, L. K., & Alexander, S. P. (2016). *Child Abuse and Neglect Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Resource_508.pdf)
- 92 David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N. & Hall, J. E. (2016). *Youth Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource_508.pdf)
- 93 Gibbs, D., Aboul-Hosn, S., & Kluckman, M. (2019). Child labor trafficking within the US: A first look at allegations investigated by Florida's Child Welfare Agency. *Journal of Human Trafficking*, 6(4), 435–449. <https://doi.org/10.1080/23322705.2019.1594551>
- 94 National Advisory Council on Migrant Health. (2018). Recommendations to the Secretary of the U.S. Department of Health and Human Services and the Administrator of the Health Resources and Services Administration. <https://www.hrsa.gov/advisory-committees/migrant-health>
- 95 U.S. Advisory Council on Human Trafficking. (2019). *Annual report 2019*. <https://www.state.gov/wp-content/uploads/2019/05/US-Advisory-Council-2019-Report.pdf>
- 96 Institute of Medicine and National Research Council. (2013). *Confronting commercial sexual exploitation and sex trafficking of minors in the United States*. The National Academies Press. 10.17226/18798. <https://cultureofrespect.org/program/enhanced-assess-acknowledge-act-aaaa-sexual-assault-resistance/>
- 97 Davis, R., Fujie Parks, L., Cohen, L. (2006). *Sexual violence and the spectrum of prevention: Towards a community solution*. National Sexual Violence Resource Center. [https://www.nsvrc.org/sites/default/files/2012-04/Publications\\_NSVRC\\_Booklets\\_Sexual-Violence-and-the-Spectrum-of-Prevention\\_Towards-a-Community-Solution\\_0.pdf](https://www.nsvrc.org/sites/default/files/2012-04/Publications_NSVRC_Booklets_Sexual-Violence-and-the-Spectrum-of-Prevention_Towards-a-Community-Solution_0.pdf)
- 98 Greenbaum, V. J., Titchen, K., Walker-Descartes, I., Feifer, A., Rood, C. J., & Fong, H. F. (2018). Multi-level prevention of human trafficking: The role of health care professionals. *Preventive medicine*, 114, 164–167. <https://doi.org/10.1016/j.ypmed.2018.07.006>





- 99 National Advisory Council on Migrant Health. (2018). Recommendations to the Secretary of the U.S. Department of Health and Human Services and the Administrator of the Health Resources and Services Administration. <https://www.hrsa.gov/advisory-committees/migrant-health>
- 100 CommonSpirit Health, HEAL Trafficking, and Pacific Survivor Center. (2021). *PEARR Tool*. <https://healtrafficking.org/resources/pearr-tool/>
- 101 U.S. Advisory Council on Human Trafficking. (2016). *Annual report 2016*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2016/>
- 102 National Human Trafficking Training and Technical Assistance Center. (2018). *Adult human trafficking screening tool and guide*. <https://nhttac.acf.hhs.gov/resources/toolkit-adult-human-trafficking-screening-tool-and-guide>
- 103 Chisolm-Straker, M., Sze, J., Einbond, J., White, J., & Stoklosa, H. (2019). Screening for human trafficking among homeless youth adults. *Children and Youth Services Review*, 98, 72–79. <https://doi.org/10.1016/j.childyouth.2018.12.014>
- 104 Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Centers for Disease Control and Prevention and the Prevention Institute. [https://www.cdc.gov/violenceprevention/pdf/connecting\\_the\\_dots-a.pdf](https://www.cdc.gov/violenceprevention/pdf/connecting_the_dots-a.pdf)
- 105 National Human Trafficking Training and Technical Assistance Center. (2019). *Human Trafficking Leadership Academy class 3 recommendations*. [https://www.acf.hhs.gov/sites/default/files/otip/htra\\_class\\_3\\_recommendations\\_on\\_2\\_generation\\_approach.pdf](https://www.acf.hhs.gov/sites/default/files/otip/htra_class_3_recommendations_on_2_generation_approach.pdf)
- 106 Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). *Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource_508.pdf)
- 107 Soreff SM, Gupta V, Wadhwa R, et al. Aggression. [Updated 2022 Oct 3]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK448073/>
- 108 National Advisory Council on Migrant Health. (2018). Recommendations to the Secretary of the U.S. Department of Health and Human Services and the Administrator of the Health Resources and Services Administration. <https://bphc.hrsa.gov/sites/default/files/bphc/technical-assistance/nacmh-recommendations-nov-2018.pdf>
- 109 Colvin, M. L., Pruett, J. A., Young, S. M., & Holosko, M. J. (2016). An exploratory case study of a sexual assault telephone hotline: Training and practice implications. *Violence Against Women*, 23(8), 973–992. <https://doi.org/10.1177/1077801216654574>
- 110 National Advisory Council on Migrant Health. (2018). Recommendations to the Secretary of the U.S. Department of Health and Human Services and the Administrator of the Health Resources and Services Administration. <https://bphc.hrsa.gov/sites/default/files/bphc/qualityimprovement/strategicpartnerships/nacmh/nacmh-recommendations-nov-2018.pdf>
- 111 U.S. Department of Labor. (2017). Grievance Mechanisms. <https://www.dol.gov/ilab/complychain/steps/5/topic/2>
- 112 Responsible Sourcing Tool. (2016). Tool 06: Conducting Migrant Worker Interviews. <https://www.responsiblesourcingtool.org/tools/workerinterviews>
- 113 U.S. Advisory Council on Human Trafficking. (2017). *Annual report 2017*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2017/>
- 114 Latzman, N. E., Gibbs, D. A., Feinberg, R. K., Kluckman, M. N., & Aboul-Hosn, S. (2019). Human trafficking victimization among youth who run away from foster care. *Children and Youth Services Review*, 98, 113–124. <https://doi.org/10.1016/j.childyouth.2018.12.022>





- 115 Williamson, E., O'Brian, J., Jones, L., Mitchell, K., & Dunford, L. (2019). Featured counter-trafficking program: Love146. *Child Abuse & Neglect*, 100. <https://doi.org/10.1016/j.chiabu.2019.104131>
- 116 Owens, C., Dank, M., Farrell, A., Breaux, J., Banuelos, I., Pfeffer, R., Heitsmith, R., Bright, K., McDevitt, J. (2014). *Understanding the Organization, Operation, and Victimization Process of Labor Trafficking in the United States*. Urban Institute. <https://www.urban.org/research/publication/understanding-organization-operation-and-victimization-process-labor-trafficking-united-states>
- 117 Latzman, N. E., Gibbs, D. A., Feinberg, R. K., Kluckman, M. N., & Aboul-Hosn, S. (2019). Human trafficking victimization among youth who run away from foster care. *Children and Youth Services Review*, 98, 113–124. <https://doi.org/10.1016/j.childyouth.2018.12.022>
- 118 Latzman, N. E., Gibbs, D. A. (2020). *Examining the Link: Foster Care Runaway Episodes and Human Trafficking*. U.S. Department of Health and Human Services, Office of Planning, Research, and Evaluation. [https://www.acf.hhs.gov/sites/default/files/documents/opre/foster\\_care\\_runaway\\_human\\_trafficking\\_october\\_2020\\_508.pdf](https://www.acf.hhs.gov/sites/default/files/documents/opre/foster_care_runaway_human_trafficking_october_2020_508.pdf)
- 119 Pullmann, M. D., Roberts, N., Parker, E. M., Mangiaracina, K. J., Briner, L., Silverman, M., & Becker, J. R. (2020). Residential instability, running away, and juvenile detention characterizes commercially sexually exploited youth involved in Washington State's child welfare system. *Child Abuse & Neglect*, 102. <https://doi.org/10.1016/j.chiabu.2020.104423>
- 120 Latzman, N. E., Gibbs, D. A., Feinberg, R. K., Kluckman, M. N., & Aboul-Hosn, S. (2019). Human trafficking victimization among youth who run away from foster care. *Children and Youth Services Review*, 98, 113–124. <https://doi.org/10.1016/j.childyouth.2018.12.022>
- 121 U.S. Department of Health and Human Services, Family and Youth Services Bureau. (2020). *Human Trafficking Prevention: Strategies for Runaway and Homeless Youth Settings*. [https://www.acf.hhs.gov/sites/default/files/documents/fysb/acf\\_issuebrief\\_htprevention\\_10202020\\_final\\_508.pdf](https://www.acf.hhs.gov/sites/default/files/documents/fysb/acf_issuebrief_htprevention_10202020_final_508.pdf)
- 122 *In Five States, There Was No Evidence That Many Children in Foster Care Had a Screening for Sex Trafficking When They Returned After Going Missing* (OEI-07-19-00371) <https://oig.hhs.gov/oei/reports/OEI-07-19-00371.asp>
- 123 U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. *Incarceration & Reentry*. <https://aspe.hhs.gov/incarceration-reentry>
- 124 Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). *Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource_508.pdf)
- 125 National Human Trafficking Training and Technical Assistance Center. (2019). *Human Trafficking Leadership Academy class 4 recommendations*. <https://nhttac.acf.hhs.gov/resources/report-htla-class-4-recommendations>
- 126 Ibid
- 127 Ibid
- 128 Fortson, B. L., Klevens, J., Merrick, M. T., Gilbert, L. K., & Alexander, S. P. (2016). *Child Abuse and Neglect Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Resource_508.pdf)
- 129 National Human Trafficking Training and Technical Assistance Center. (2019). *Human Trafficking Leadership Academy class 4 recommendations*. <https://nhttac.acf.hhs.gov/resources/report-htla-class-4-recommendations>



- 130 Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). *Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource_508.pdf)
- 131 U.S. Advisory Council on Human Trafficking. (2016). *Annual report 2016*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2016/>
- 132 U.S. Advisory Council on Human Trafficking. (2019). *Annual report 2019*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2019/>
- 133 David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N. & Hall, J. E. (2016). *Youth Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource_508.pdf)
- 134 Norman, R. E., Byambaa, M., De, R., Butchart, A., Scott, J., & Vos, T. (2012). The long-term health consequences of child physical abuse, emotional abuse, and neglect: A systematic review and meta-analysis. *PLOS Medicine*, 9(11). <https://doi.org/10.1371/journal.pmed.1001349>
- 135 Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) study. *American Journal of Preventive Medicine*, 14(4), 245–258. [https://doi.org/10.1016/S0749-3797\(98\)00017-8](https://doi.org/10.1016/S0749-3797(98)00017-8)
- 136 Rosenblatt, K. (2014). Determining the vulnerability factors, lures and recruitment methods used to entrap American children into sex trafficking. *Social Criminology*, 2(1). <https://doi.org/10.4172/2375-4435.1000108>
- 137 Cole, J. & Anderson, E. (2013). *Sex trafficking of minors in Kentucky*. Center on Trauma and Children, University of Kentucky. [https://uknowledge.uky.edu/ctac\\_reports/2](https://uknowledge.uky.edu/ctac_reports/2)
- 138 Corbett, A. (2018). The voices of survivors: An exploration of the contributing factors that assisted with exiting from commercial sexual exploitation in childhood. *Child and Youth Services Review*, 85, 91–98. <https://doi.org/10.1016/j.childyouth.2017.12.009>
- 139 National Human Trafficking Training and Technical Assistance Center. (2019). *Human Trafficking Leadership Academy class 4 recommendations*. <https://nhttac.acf.hhs.gov/resources/report-htta-class-4-recommendations>
- 140 Chaiyachati, B. H., Gaither, J. R., Hughes, M., Foley-Schain, K., & Leventhal, J. M. (2018). Preventing child maltreatment: Examination of an established statewide home-visiting program. *Child Abuse & Neglect*, 79, 476–484. <https://doi.org/10.1016/j.chiabu.2018.02.019>
- 141 American Academy of Pediatrics. (2022). Early Relational Health. <https://www.aap.org/en/patient-care/early-childhood/early-relational-health/>
- 142 Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). *Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource_508.pdf)
- 143 Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Centers for Disease Control and Prevention and the Prevention Institute. <https://www.cdc.gov/violenceprevention/pdf/connecting-the-dots-a.pdf>



- 144 David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N. & Hall, J. E. (2016). *Youth Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource_508.pdf)
- 145 Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Centers for Disease Control and Prevention and the Prevention Institute. <https://www.cdc.gov/violenceprevention/pdf/connecting-the-dots-a.pdf>
- 146 Ibid
- 147 Schilling Wolfe, D., Greeson, J. K. P., Wasch, S., & Treglia, D. (2018). *Human trafficking prevalence and child welfare risk factors among homeless youth: A multi-city study*. The Field Center for Children's Policy, Practice & Research, University of Pennsylvania. <https://fieldcenteratpenn.org/wp-content/uploads/2022/12/6230-R10-Field-Center-Full-Report-Web.pdf>
- 148 Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Centers for Disease Control and Prevention and the Prevention Institute. <https://www.cdc.gov/violenceprevention/pdf/connecting-the-dots-a.pdf>
- 149 David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N. & Hall, J. E. (2016). *Youth Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/YV-Prevention-Resource_508.pdf)
- 150 Abbott, M., Landers, P., & Pratt, E. (2019). *Peer-to-peer supports: Promoting employment and well-being*. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. <https://aspe.hhs.gov/system/files/aspe-files/261791/promotingemploymentwellbeing.pdf>
- 151 Veatch, M., Goldstein, G. P., Sacks, R., Lent, M., Van Wye, G. (2014). Institution-to-institution mentoring to build capacity in 24 local US Health Departments: Best practices and lessons learned. *Preventing Chronic Disease*, 11(E168), 1–8. <http://dx.doi.org/10.5888/pcd11.140017>
- 152 Henson, M., Sabo, S., Trujillo, A., & Teufel-Shone, N. (2017). Identifying protective factors to promote health in American Indian and Alaska Native adolescents: A literature review. *The Journal of Primary Prevention*, 38(1-2), 5–26. <https://www.ncbi.nlm.nih.gov/pubmed/27826690>
- 153 Centers for Disease Control and Prevention. (2020). *Risk and Protective Factors*. <https://www.cdc.gov/violenceprevention/youthviolence/riskprotectivefactors.html>
- 154 U.S. Department of Labor. (2017). What Makes a Good Code of Conduct? <https://www.dol.gov/ilab/complychain/steps/3/topic/2>
- 155 Responsible Sourcing Tool. (2016). Tool 06: Conducting Migrant Worker Interviews. <https://www.responsiblesourcingtool.org/tools/workerinterviews>
- 156 Ibid
- 157 Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). *Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/IPV-Prevention-Resource_508.pdf)
- 158 National Advisory Committee on the Sex Trafficking of Children and Youth in the United States. (2020). Best Practices and Recommendations for States. <https://www.acf.hhs.gov/otip/resource/national-advisory-committee-report-best-practices-recommendations>
- 159 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)



- 160 State laws mandating business disclosures: Texas: Human trafficking business partnership under [§405.023 of the Texas Government Code](#) and [1 Texas Administrative Code Chapter 90](#). California: [Transparency in Supply Chains Act, Senate Bill No. 657](#).
- 161 Office of Management and Budget. (2019). Anti-Trafficking Risk Management Best Practices & Mitigation Considerations. <https://www.whitehouse.gov/wp-content/uploads/2019/10/M-20-01.pdf>
- 162 U.S. Department of Labor. (2017). Comply Chain Step 5: Monitor Compliance. <https://www.dol.gov/ilab/complychain/steps/5>
- 163 U.S. Department of Labor. (2017). Why Conduct Risk and Impact Assessments? <https://www.dol.gov/ilab/complychain/steps/2/topic/1>
- 164 Responsible Sourcing Tool. (2016). Tool 07A: Supply Chain Mapping and Risk Screening. <https://www.responsiblesourcingtool.org/tools/supply-chain-mapping>
- 165 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)
- 166 Davis, R., Fujie Parks, L., Cohen, L. (2006). *Sexual violence and the spectrum of prevention: Towards a community solution*. National Sexual Violence Resource Center. [https://www.nsvrc.org/sites/default/files/2012-04/Publications\\_NSVRC\\_Booklets\\_Sexual-Violence-and-the-Spectrum-of-Prevention\\_Towards-a-Community-Solution\\_0.pdf](https://www.nsvrc.org/sites/default/files/2012-04/Publications_NSVRC_Booklets_Sexual-Violence-and-the-Spectrum-of-Prevention_Towards-a-Community-Solution_0.pdf)
- 167 National Advisory Committee on the Sex Trafficking of Children and Youth in the United States. (2020). Best Practices and Recommendations for States. <https://www.acf.hhs.gov/otip/resource/national-advisory-committee-report-best-practices-recommendations>
- 168 Davis, R., Fujie Parks, L., Cohen, L. (2006). *Sexual violence and the spectrum of prevention: Towards a community solution*. National Sexual Violence Resource Center. [https://www.nsvrc.org/sites/default/files/2012-04/Publications\\_NSVRC\\_Booklets\\_Sexual-Violence-and-the-Spectrum-of-Prevention\\_Towards-a-Community-Solution\\_0.pdf](https://www.nsvrc.org/sites/default/files/2012-04/Publications_NSVRC_Booklets_Sexual-Violence-and-the-Spectrum-of-Prevention_Towards-a-Community-Solution_0.pdf)
- 169 Ibid
- 170 National Conference of State Legislators. (March 2019). *Human Trafficking State Laws*. <https://www.ncsl.org/civil-and-criminal-justice/human-trafficking-state-laws#tabs-4>
- 171 U.S. Department of Health and Human Services, Office on Trafficking in Persons. (2019). *National Roundtable on Safeguarding Children and Prevention Education Post-Roundtable Brief*. [https://www.acf.hhs.gov/sites/default/files/documents/otip/national\\_roundtable\\_information\\_brief\\_final\\_508.pdf](https://www.acf.hhs.gov/sites/default/files/documents/otip/national_roundtable_information_brief_final_508.pdf)
- 172 Institute of Medicine (US) Committee on Data Standards for Patient Safety. Health care data standards. In Aspden, P., Corrigan, J. M., Wolcott, J., Erickson, S. M. (Eds.), *Patient safety: Achieving a new standard for care* (pp. 127–172). National Academies Press. <https://www.ncbi.nlm.nih.gov/books/NBK216088/>
- 173 U.S. Department of Health and Human Services, Office of Planning, Research and Evaluation. (2016). *Using Administrative Data in Social Policy Research* (Report No. 2016-62). [https://www.acf.hhs.gov/sites/default/files/documents/opre/promises\\_and\\_challenges\\_20160809\\_508\\_compliant.pdf](https://www.acf.hhs.gov/sites/default/files/documents/opre/promises_and_challenges_20160809_508_compliant.pdf)
- 174 U.S. Department of Labor. (2017). Comply Chain Step 1: Engage Stakeholders and Partners. <https://www.dol.gov/ilab/complychain/steps/1>
- 175 U.S. Department of Labor. (2017). Multi-Stakeholder Groups. <https://www.dol.gov/ilab/complychain/steps/1/topic/4>
- 176 U.S. Department of Health and Human Services. (2023). ACF Announces New Public-Private Working Group to Address Forced Labor in Healthcare and Public Health Supply Chains. <https://www.acf.hhs.gov/media/press/2023/media/acf-announces-new-public-private-working-group-address-forced-labor>





- 177 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)
- 178 Ibid
- 179 Coker, A. L., Bush, H. M., Cook-Craig, P. G., DeGue, S. A., Clear, E. R., Brancato, C. J., Fisher, B. S., & Recktenwald, E. A. (2017). RCT testing bystander effectiveness to reduce violence. *American Journal of Preventive Medicine*, 52(5), 566–578. <https://doi.org/10.1016/j.amepre.2017.01.020>
- 180 Tabachnick, J. (2008). *Engaging bystanders in sexual violence prevention*. National Sexual Violence Resource Center. [https://www.nsvrc.org/sites/default/files/2012-03/Publications\\_NSVRC\\_Booklets\\_Engaging-Bystanders-in-Sexual-Violence-Prevention.pdf](https://www.nsvrc.org/sites/default/files/2012-03/Publications_NSVRC_Booklets_Engaging-Bystanders-in-Sexual-Violence-Prevention.pdf)
- 181 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)
- 182 Ibid
- 183 Ibid
- 184 Scott, L., Crenshaw, C., & Venegas, E. (2017). Bodies are not commodities: Examining A21 curriculum's impact on students' knowledge, attitudes, and advocacy about anti-human trafficking rights and issues. *Journal of Human Trafficking*, 5(1), 24–42. <https://doi.org/10.1080/23322705.2017.1393742>
- 185 U.S. Department of Justice, Office on Violence Against Women. (January 2017). *Working with men to prevent gender-based violence*. <https://www.justice.gov/archives/ovw/blog/working-men-prevent-gender-based-violence>
- 186 Basile, K.C., DeGue, S., Jones, K., Freire, K., Dills, J., Smith, S.G., Raiford, J.L. (2016). *Sexual Violence Prevention Resource for Action: A Compilation of the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. [https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource\\_508.pdf](https://www.cdc.gov/violenceprevention/pdf/SV-Prevention-Resource_508.pdf)
- 187 Cohen, L. & Swift, Susan. (1999). The spectrum of prevention: Developing comprehensive approach to injury prevention. *Injury Prevention*, 5, 203–207. <https://www.preventioninstitute.org/sites/default/files/uploads/The%20Spectrum%20of%20Prevention-%20Developing%20a%20Comprehensive%20Approach%20to%20Injury%20Prevention.pdf>
- 188 Davis, R., Fujie Parks, L., Cohen, L. (2006). *Sexual violence and the spectrum of prevention: Towards a community solution*. National Sexual Violence Resource Center. [https://www.nsvrc.org/sites/default/files/2012-04/Publications\\_NSVRC\\_Booklets\\_Sexual-Violence-and-the-Spectrum-of-Prevention\\_Towards-a-Community-Solution\\_0.pdf](https://www.nsvrc.org/sites/default/files/2012-04/Publications_NSVRC_Booklets_Sexual-Violence-and-the-Spectrum-of-Prevention_Towards-a-Community-Solution_0.pdf)
- 189 U.S. Advisory Council on Human Trafficking. (2017). *Annual report 2017*. <https://www.state.gov/united-states-advisory-council-on-human-trafficking-annual-report-2017/>





- 190 U.S. Department of Labor. (2017). Comply Chain Step 8: Report Performance and Engagement. <https://www.dol.gov/ilab/complychain/steps/8>
- 191 Responsible Sourcing Tool. (2016). Tool 05: Monitoring Labor Recruiters. <https://www.responsiblesourcingtool.org/tools/monitoringrecruiters>
- 192 Alpert, E., & Chin, S. (2017). Human trafficking: Perspectives on prevention. In M. Chisolm-Straker & H. Stoklosa (Eds.) *Human trafficking is a public health issue*. (pp. 379–400). [https://link.springer.com/chapter/10.1007/978-3-319-47824-1\\_22](https://link.springer.com/chapter/10.1007/978-3-319-47824-1_22)
- 193 Institute of Medicine and National Research Council. (2013). *Confronting commercial sexual exploitation and sex trafficking of minors in the United States*. The National Academies Press. 10.17226/18798
- 194 Rothman, E. F., Farrell, A., Paruk, J., Bright, K., Bair-Merritt, M., & Preis, S. R. (2021). Evaluation of a Multi-Session Group Designed to Prevent Commercial Sexual Exploitation of Minors: The “My Life My Choice” Curriculum. *Journal of Interpersonal Violence*, 36(19–20), 9143–9166. <https://doi.org/10.1177/0886260519865972>
- 195 Wilkins, N., Tsao, B., Hertz, M., Davis, R., & Klevens, J. (2014). *Connecting the dots: An overview of the links among multiple forms of violence*. Centers for Disease Control and Prevention and the Prevention Institute. [https://www.cdc.gov/violenceprevention/pdf/connecting\\_the\\_dots-a.pdf](https://www.cdc.gov/violenceprevention/pdf/connecting_the_dots-a.pdf)
- 196 Decker, M. R., Wilcox, H. C., Holliday, C. N., & Webster, D. W. (2018). An integrated public health approach to interpersonal violence and suicide prevention and response. *Public Health Reports*, 133(1\_suppl), 65S–79S. <https://doi.org/10.1177/0033354918800019>

